2019/2020 Lucas County Community Health Assessment

Released December 8, 2020

HEALTHY
LUCAS COUNTY

HEALTHY LUCAS COUNTY

Executive Committee

- Adelante
- Advocates for Basic Legal Equality
- Area Office on Aging of Northwestern Ohio
- Board of Lucas County Commissioners
- City of Toledo
- CWA Local 4319
- Connecting Kids to Meals
- Health Partners of Western Ohio
- Hospital Council of Northwest Ohio
- LISC Toledo
- Live Well Greater Toledo
- Lucas County Department of Job & Family Services
- Lucas Metropolitan Housing Authority
- McLaren St. Luke's
- Mental Health & Recovery Services Board of Lucas County
- Mercy Health
- NAACP 3204
- Neighborhood Health Association
- ProMedica
- Toledo Fire & Rescue
- Toledo/Lucas County CareNet
- Toledo-Lucas County Health Department
- Toledo Lucas County Homelessness Board
- Toledo Public Schools
- United Way of Greater Toledo
- University of Toledo Medical Center
- YMCA of Greater Toledo
- YWCA of Northwest Ohio

Formed in 1998, the Healthy Lucas County coalition of community health improvement organizations surveys residents of all ages about their health and well-being every three years. The anonymous surveys ask questions about general physical health, mental health, nutrition, exercise, living conditions and other topics. This report, the 2019/2020 Lucas County Community Health Assessment, details findings from surveys conducted with youth in participating schools in late 2019 and mailed to randomly selected adults and parents of young children in early 2020.

The Healthy Lucas County Executive Committee, which governs the coalition, and the assessment's evaluation team have made every effort to assure this report contains valid and reliable data. Please note, however, that this data is from a snapshot in time. For example, surveys were returned before the COVID-19 pandemic became a public health crisis and had a disproportionate effect on people of color in Lucas County and beyond.

The 2019/2020 Lucas County Community Health Assessment measures the health of Lucas County residents on thousands of variables. Data from assessments through the years can be compared to show both areas of improvement and areas that continue to be challenges. This report also compares the health of Lucas County residents to those in the state and nationwide overall.

Conducting these health assessments helps Healthy Lucas County Executive Committee members and other organizations determine where to direct efforts to improve the health of Lucas County residents. For example, data from prior surveys have helped coalition members receive millions of dollars in grant funding. This funding has helped women have healthy babies, students get afterschool snacks and meals, adults manage diabetes and heart disease, and numerous other projects.

Findings from the 2019/2020 Lucas County Community Health Assessment also will be used by the Healthy Lucas County Executive Committee and its partners to develop the 2021-2024 Lucas County Community Health Improvement Plan. The plan will identify priorities to improve the health of Lucas County residents, outline ways to address disparities in the community, provide action steps to achieve changes that will benefit everyone, and incorporate measurements to determine whether progress is being made. To participate in developing the plan or to learn more, please visit **healthylucascounty.org**

Healthy Lucas County members work toward collective impact, a belief that large-scale social change comes from better cross-sector coordination rather than the isolated interventions of individual organizations. The Healthy Lucas County Executive Committee hopes this assessment will be a valuable tool to assist community-wide efforts to improve the health and well-being of all Lucas County residents.

Acknowledgements

The Healthy Lucas County Executive Committee commissioned this report, which was funded by the following member organizations and the Greater Toledo Community Foundation:

Fostering Healthy Communities (collaboration among Mercy Health, ProMedica and the University of Toledo Medical Center)
Toledo-Lucas County Health Department
United Way of Greater Toledo
Mental Health & Recovery Services Board of Lucas County
McLaren St. Luke's
Board of Lucas County Commissioners
Lucas County Department of Job & Family Services
City of Toledo
Neighborhood Health Association
Health Partners of Western Ohio
YMCA of Greater Toledo
Toledo-Lucas County Public Library*
Area Office on Aging of Northwestern Ohio
CWA Local 4319
NAACP #3204

*Member of Healthy Lucas County Executive Committee in 2019.

Other Healthy Lucas County Executive Committee member organizations include:

Adelante
Advocates for Basic Legal Equality
Connecting Kids to Meals
Hospital Council of Northwest Ohio
LISC Toledo
Live Well Greater Toledo
Lucas Metropolitan Housing Authority
Toledo Fire & Rescue
Toledo/Lucas County CareNet
Toledo Lucas County Homelessness Board
Toledo Public Schools
YWCA of Northwest Ohio

Contact Information

Julie McKinnon
Healthy Lucas County Coordinator
Hospital Council of Northwest Ohio
3231 Central Park West Dr., Suite 200
Toledo, OH 43617
(419)-842-0800
jmckinnon@hcno.org

Project Management, Secondary Data, Data Collection, and Report Development
Hospital Council of Northwest Ohio

Margaret Wielinski, MPH
Interim Director of Community Health Improvement

Tessa Elliott, MPH
Community Health Improvement Manager

Emily Stearns, MPH
Community Health Improvement Manager

Mallory Ohneck, MPH, CHES
Community Health Improvement Data Manager

Gabrielle Mackinnon, MPH
Community Health Improvement Coordinator

Carolynn McCartney
Graduate Assistant

Jodi Franks
Graduate Assistant

Natalie Deeb
Graduate Assistant

Bailey Fitzgerald
Undergraduate Assistant

Data Collection & Analysis

Joseph A. Dake, Ph.D., MPH
Professor and Chair
School of Population Health
University of Toledo

Aaron J. Kruse-Diehr, Ph.D.
Consultant

To see Lucas County data compared to other counties, please visit the Hospital Council of Northwest Ohio's Data Link website at:

www.hcno.org/community-services/data-link/

The 2019/2020 Lucas County Health Assessment is available on the following websites:

Healthy Lucas County
http://www.healthylucascounty.org/about-us/our-reports/

Hospital Council of Northwest Ohio
http://www.hcno.org/community-services/community-health-assessments/

Mental Health and Recovery Services Board of Lucas County
https://www.lcmhrsb.oh.gov/resources/

Toledo-Lucas County Health Department
https://www.lucascountyhealth.com/reports-data/

Table of Contents

EXECUTIVE SUMMARY	Page Number
Primary Data Collection Methods	7-9
Secondary Data Collection Methods	10
2019 Ohio State Health Assessment (SHA)	10
Data Summary	11-39
Trend Summary	40-56
HEALTH CARE ACCESS	
Health Care Coverage	57-59
Access and Utilization	60-62
Preventive Medicine	63-65
Women's Health	66-67
Men's Health	68-69
Oral Health	70-71
HEALTH BEHAVIORS	
Health Status Perceptions	72-74
Adult Weight Status	75-79
Adult Tobacco Use	80-82
Adult Alcohol Consumption	83-85
Adult Drug Use	86-91
Adult Sexual Behavior	92-96
Adult Mental Health	97-100
CHRONIC DISEASE	
Cardiovascular Health	101-106
Cancer	107-113
Arthritis	114-115
Asthma	116-118
Diabetes	119-120
Quality of Life	121-122
SOCIAL CONDITIONS	
Social Determinants of Health	123-131
Environmental Conditions	132
AFRICAN AMERICAN HEALTH CARE ACCESS	
Health Care Coverage	133-135
Access and Utilization	136-137
Preventive Medicine	138-140
Women's Health	141-142
Men's Health	143-144
Oral Health	145-146
AFRICAN AMERICAN HEALTH BEHAVIORS	
Health Status Perceptions	147-149
Adult Weight Status	150-152
Adult Tobacco Use	153-154
Adult Alcohol Consumption	155-157
Adult Drug Use	158-160
Adult Sexual Behavior	161-163
Adult Mental Health	164-165

AFRICAN AMERICAN CHRONIC DISEASE

Cardiovascular Health	166-171
Cancer	172-178
Arthritis	179
Asthma	180-181
Diabetes	182-183
Quality of Life	184-185

AFRICAN AMERICAN SOCIAL CONDITIONS

Social Determinants of Health	186-192
Environmental Conditions	193

LATINO HEALTH CARE ACCESS

Health Care Coverage	194-196
Access and Utilization	197-199
Preventive Medicine	200-202
Women's Health	203-204
Men's Health	205-206
Oral Health	207-208

LATINO HEALTH BEHAVIORS

Health Status Perceptions	209-211
Adult Weight Status	212-214
Adult Tobacco Use	215-217
Adult Alcohol Consumption	218-220
Adult Drug Use	221-223
Adult Sexual Behavior	224-226
Adult Mental Health	227-228

LATINO CHRONIC DISEASE

Cardiovascular Health	229-234
Cancer	235-241
Arthritis	242
Asthma	243-244
Diabetes	245-246
Quality of Life	247-248

LATINO SOCIAL CONDITIONS

Social Determinants of Health	249-255
Environmental Conditions	256

YOUTH HEALTH

Weight Status	257-259
Tobacco Use	260-263
Alcohol Consumption	264-267
Drug Use	268-271
Perceptions of Substance Use	272-274
Sexual Behavior	275-278
Mental Health	279-283
Social Determinants of Health	284-286
Violence	287-290

CHILD HEALTH

Child Health and Function Status	291-294
Child Health Care Access	295-299
Early Childhood (Ages 0-5)	300-303
Middle Childhood (Ages 6-11)	304-305
Family and Community Characteristics	306-310
Parent Health	311-312

APPENDICES

APPENDIX I	**Health Assessment Information Sources**	313-317
APPENDIX II	**Acronyms and Terms**	318-319
APPENDIX III	**Weighting Methods**	320-322
APPENDIX IV	**School Participation**	323
APPENDIX V	**Demographic Profile**	324-325
APPENDIX VI	**Demographics and Household Information**	326-332
APPENDIX VII	**2020 County Health Rankings**	333-335
APPENDIX VIII	**Community Stakeholder Perceptions**	336-337

Executive Summary

This executive summary provides an overview of health-related data for Lucas County adults (19 years of age and older), youth (ages 12-18), and children (parents of children ages 0-11 completed the survey) who participated in a county-wide health assessment survey from November 2019 through mid-March 2020, before the COVID-19 pandemic became a public health crisis nationwide. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention (CDC) for their national and state Behavioral Risk Factor Surveillance System (BRFSS) and Youth Risk Behavior Surveillance System (YRBSS), as well as the National Survey of Children's Health (NSCH) developed by the Child and Adolescent Health Measurement Initiative. The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

Primary Data Collection Methods

DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents of young children within Lucas County. In addition to the general survey mailing, the Healthy Lucas County Executive Committee determined it would be beneficial to oversample the African American and Latino populations. Sections and trend summary tables were created for both populations to identity disparities among the African American and Latino communities. From the beginning, community leaders and members were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

INSTRUMENT DEVELOPMENT

Three survey instruments were designed and pilot tested for this study: one for adults, one for adolescents in grades 6-12, and one for parents of children ages 0-11. As a first step in the design process, health education researchers from The University of Toledo and staff members from The Hospital Council of Northwest Ohio (HCNO) met to discuss potential sources of valid and reliable survey items that would be appropriate to assess the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of survey items for the adolescent survey were derived from the YRBSS, and most of the survey items for the parents of children 0-11 were derived from the NSCH. This decision was based on being able to compare local data with state and national data.

The project coordinator from The Hospital Council of Northwest Ohio conducted a series of meetings with Healthy Lucas County's Executive Committee. During these meetings, HCNO and Healthy Lucas County's Executive Committee reviewed and discussed banks of potential survey questions from the BRFSS, YRBSS and NSCH surveys. Based on input from Healthy Lucas County's Executive Committee, the project coordinator composed drafts of surveys containing 115 items for the adult survey, 77 items for the adolescent survey, and 82 items for the children's survey. The drafts were reviewed and approved by health education researchers at The University of Toledo.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and older living in Lucas County. There were an estimated 326,715 people ages 19 and older living in Lucas County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error of the survey findings). A sample size of at least 384 adults was needed to ensure this level of confidence for the general population. The investigators also calculated the population of African American and Latino adults living in Lucas County. According to 2015 American Community Survey 5-year estimates, approximately 59,373 African American and 16,961 Latino adults 19 years and older were living in Lucas County. A sample size of at least 382 African American adults and 376 Latino adults were needed to ensure a 95% confidence level for each population.

The random sample of mailing addresses of adults from Lucas County was obtained from Melissa Data Corporation in Rancho Santa Margarita, California. Surveys were mailed in early February 2020 and returned through mid-March 2020.

SAMPLING | Adolescent Survey

The sampling frame for the adolescent survey consisted of youth in grades 6-12 in Lucas County public school districts. For more information on participating districts and schools, see Appendix IV. The U.S. 2010 Census Bureau reported that approximately 43,198 of youth ages 12-18 years old live in Lucas County. A sample size of 382 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error of the survey findings). Students were randomly selected and surveyed in the schools in November and December 2019.

SAMPLING | 0-11 Survey

The sampling frame for the survey of children consisted of parents of children ages 0-11 in Lucas County. The U.S. 2010 Census Bureau determined that approximately 69,902 children ages 0-11 live in Lucas County. The investigators conducted a power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error). The sample size required to generalize to children ages 0-11 was 382. The random sample of mailing addresses of parents of children 0-11 was obtained from Melissa Data Corporation in Rancho Santa Margarita, California. Surveys were mailed in early February 2020 and returned through mid-March 2020.

PROCEDURE | Adult Survey

Prior to mailing the survey, the project coordinator mailed an advance letter to 6,800 adults in Lucas County: 2,000 to the general population, 2,400 to the African American population, and 2,400 to the Latino population. This advance letter was printed on Healthy Lucas County Executive Committee stationery and signed on behalf of the group by Executive Committee Chair Sister Dorothy Thum of Mercy Health and Executive Committee Chair Erika. D. White of CWA Local 4319 and NAACP 3204. The letter introduced the county health assessment project and informed readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected, and it encouraged the readers to complete and return the survey promptly if they were selected.

Three weeks following the advance letter, a mailing procedure was implemented to maximize the survey return rate. The mailing included a personalized, hand signed cover letter (on Healthy Lucas County Executive Committee stationery) describing the purpose of the study, the questionnaire, a self-addressed stamped return envelope, and a $2 incentive, which were all included in a large green envelope. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the general population was 10% (n=698: CI=± 3.71). This return rate and sample size means that the responses in the health assessment should be representative of the entire county. There were a total of 146 African American respondents (n=146: CI= ± 8.1) and 114 Latino respondents (n=114: CI= ± 9.1). As a result, there is a greater margin of error when generalizing to the overall population of these specific two racial/ethnic groups. Caution should be taken when generalizing the results of this assessment to the African American and Latino communities.

Note: "n" refers to the total sample size, "CI" refers to the confidence internal.

PROCEDURE | Adolescent Survey

The survey was approved by all participating superintendents. Schools and grades were randomly selected. Each student in a particular grade had to have an equal chance of being in the class that was selected, such as a home room or health class. Classrooms were randomly chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 91% (n=1,033: CI=± 3.01). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

Note: "n" refers to the total sample size, "CI" refers to the confidence internal.

PROCEDURE | Children 0-5 and 6-11

Prior to mailing the survey to parents of children ages 0-11, the project team mailed an advance letter to 5,000 parents in Lucas County. This advance letter was printed on Healthy Lucas County Executive Committee stationery and signed on behalf of the group by Executive Committee Chair, Sister Dorothy Thum of Mercy Health and Executive Committee Chair Erika D. White of CWA Local 4319 and NAACP 3204. The letter introduced the county health assessment project and informed readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Three weeks following the advance letter, a mailing procedure was implemented to maximize the survey return rate. The mailing included a personalized, hand-signed cover letter (on Healthy Lucas County Executive Committee stationery) describing the purpose of the study, a questionnaire, a self-addressed stamped return envelope, and a $2 incentive. Surveys returned as undeliverable were not replaced with another potential respondent. The response rate was 6% (n=304: CI=± 5.61).

Note: "n" refers to the total sample size, "CI" refers to the confidence internal.

DATA ANALYSIS

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using Statistical Product and Service Solutions 26.0 (SPSS). Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Lucas County, the adult data collected was weighted by age, gender, race, and income using Census data (Note: income data throughout the report represents annual household income). Multiple weightings were created based on this information to account for different types of analyses. Additionally, due to variation in the sizes of the classes selected as well as to some districts which sampled additional general education classes, it was determined that applying a weighting during analyses would be important. For more information on how the adult weightings were created and applied, see Appendix III.

LIMITATIONS

As with all county health assessments, it is important to consider the findings with respect to all possible limitations. First, the Lucas County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Lucas County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Second, the response rate for African Americans and Latinos in Lucas County was very low, even though a specialized mailing list was purchased to recruit African Americans and Latinos. To be 95% confident in our findings with a 5% margin of error, we would have needed 382 surveys to be returned from the African American population and 376 from the Latino population. Response rates for both populations were low, yielding only 146 African American responses and 114 Latino responses and resulting in margins of error of 8.1% and 9.1%, respectively. Additionally, the child data did not include enough African American or Latino responses to break the data down into a child-specific minority trend summary table.

Furthermore, while the minority adult surveys were sent to random households in Lucas County, those responding to the survey were more likely to be older. While weightings were applied during calculations to help account for this, it still presents a potential limitation (to the extent that the responses from these individuals might be substantively different than the majority of Lucas County minority residents younger than 30). Therefore, those younger than 30 were not included in the African American or Latino graphs throughout the report.

Additionally, the African American and Latino trend summary and comparison tables reflect 2018 state and national Behavioral Risk Factor Surveillance System (BRFSS) comparison data. 2019 comparison data was not yet available as of November 2020 via the Center for Disease Control and Prevention's (CDC) Web Enabled Analysis Tool (WEAT), which allows custom crosstabulation tables for health indicators to be viewed by race and ethnicity.

It is important to note that, although several questions were asked using the same wording as the CDC questionnaires and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than via mail survey. The youth CDC survey was administered in schools in a similar fashion as this county health assessment.

Lastly, this survey asked parents questions regarding their young children. Should enough parents have felt compelled to give incorrect information about their child's health for a favorable response, this would represent a threat to the internal validity of the results.

Secondary Data Collection Methods

HCNO collected secondary data, including county-level data, from multiple sources whenever possible. HCNO utilized sources such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC webpages, U.S. Census data, Healthy People 2020, and other national and local sources. All primary data in this report is from the 2019/2020 Lucas County Community Health Assessment (CHA). All other data is cited accordingly.

2019 Ohio State Health Assessment (SHA)

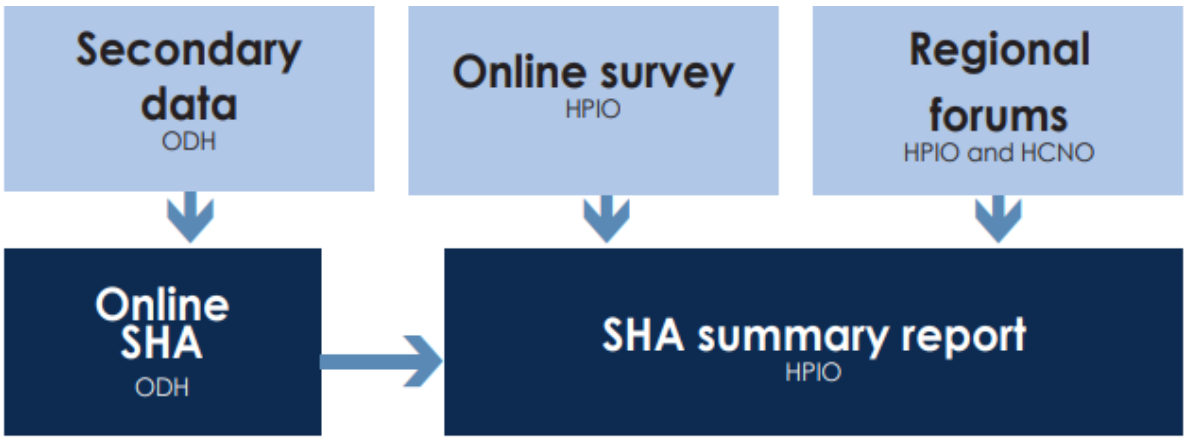
The 2019 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, online surveys completed by over 300 stakeholders, and advisory and steering committee members who represented 13 state agencies, including sectors beyond health.

Similar to the 2019 Ohio SHA, the 2019/2020 Lucas County Community Health Assessment (CHA) examined a variety of metrics from various areas of health including, but not limited to, health behaviors, chronic disease, access to health care, and social determinants of health. Additionally, the CHA studied themes and perceptions from local public health stakeholders from a wide variety of sectors. **Note: This symbol will be displayed in the trend summary when an indicator directly aligns with the 2019 Ohio SHA.**

The interconnectedness of Ohio's greatest health challenges, along with the overall consistency of health priorities identified in this assessment, indicates many opportunities for collaboration among a wide variety of partners at and between the state and local level, including physical and behavioral health organizations and sectors beyond health. It is Healthy Lucas County's hope that this CHA will serve as a foundation for such collaboration.

To view the full 2019 Ohio State Health Assessment, please visit: https://odh.ohio.gov/wps/portal/gov/odh/about-us/sha-ship/

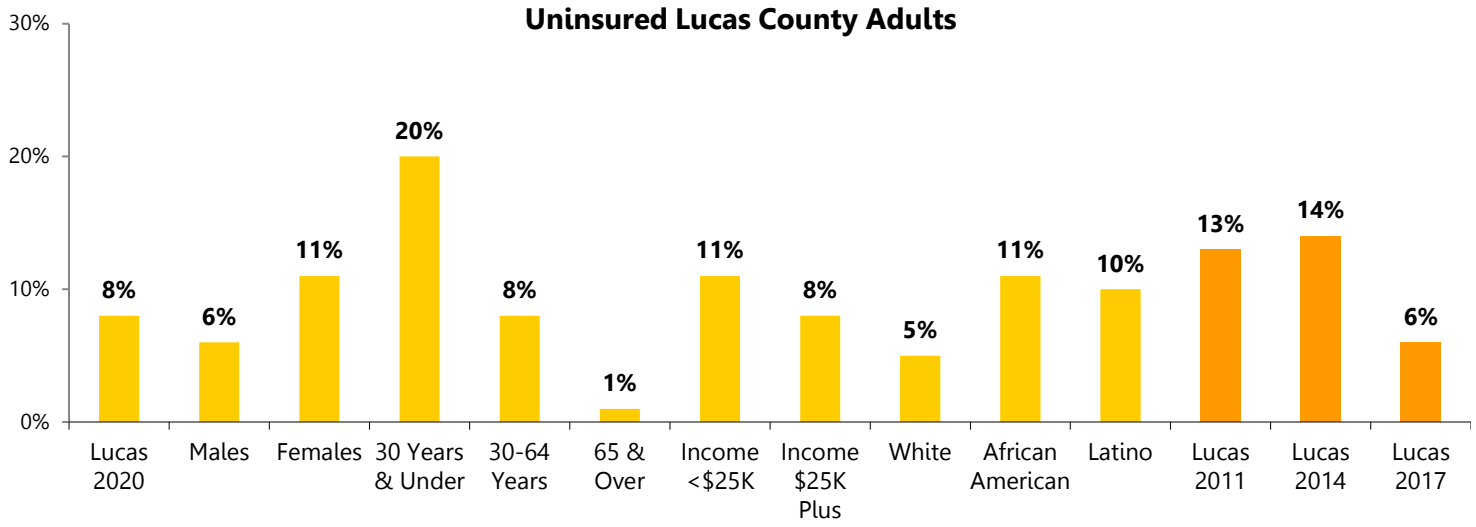
FIGURE 1.1 | Components of the 2019 State Health Assessment (SHA)



Data Summary | Health Care Access

HEALTH CARE COVERAGE

In 2020, 8% of Lucas County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30 (20%) and those with annual income levels under $25,000 (11%). The top reason adults reported for being without health care coverage was cost (37%).

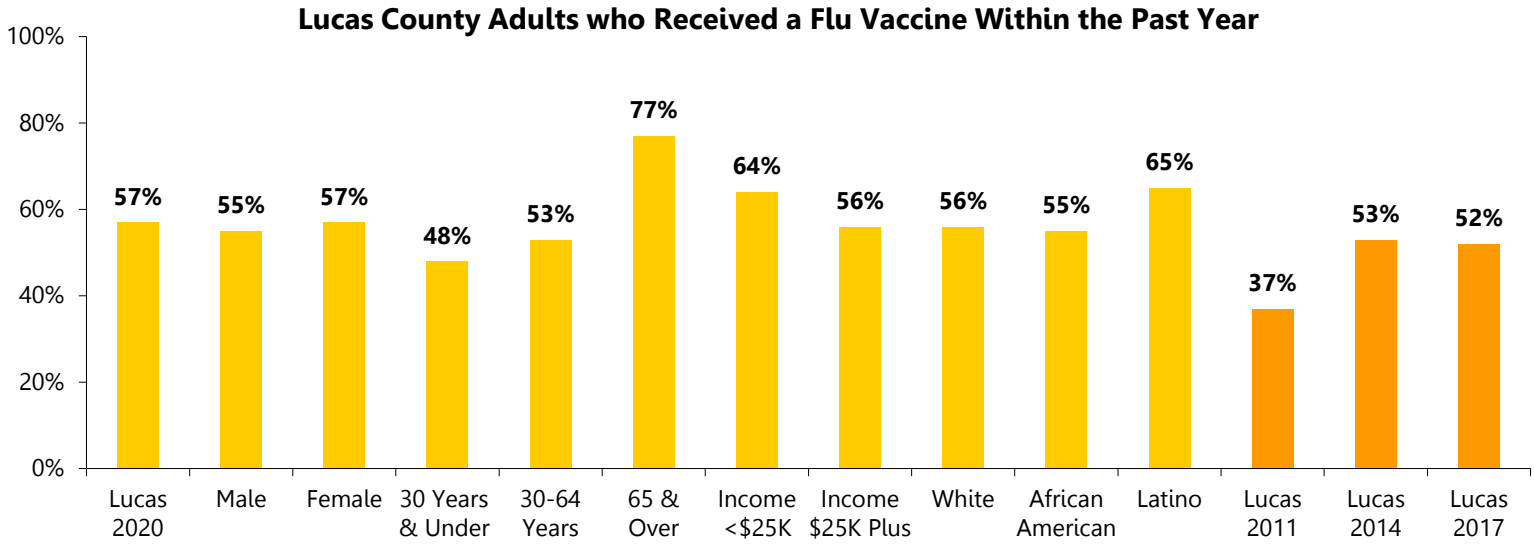


ACCESS AND UTILIZATION

Eleven percent (11%) of adults went outside of Lucas County for health care services in the past year. Twenty percent (20%) of adults looked for a program to help with depression, anxiety, or some mental health problem.

PREVENTIVE MEDICINE

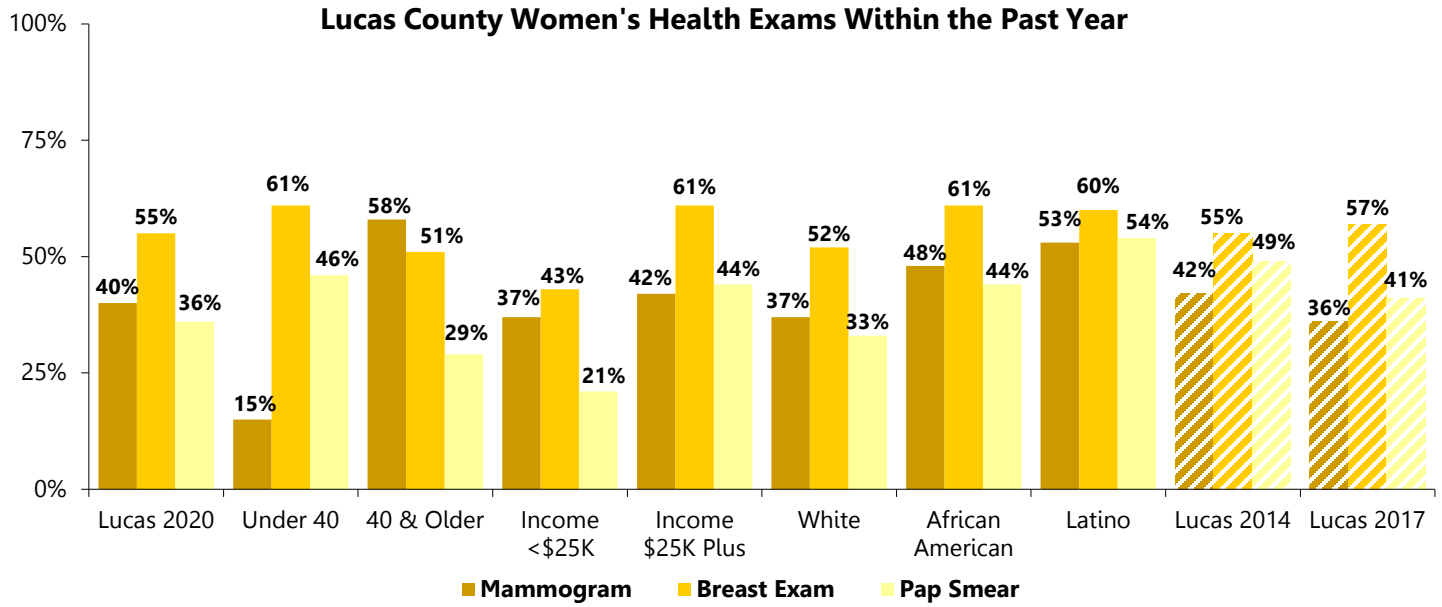
More than half (57%) of Lucas County adults had a flu vaccine during the past year. Nearly three-fourths (73%) of adults ages 65 and older had a pneumonia vaccination at some time in their life.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

WOMEN'S HEALTH

In 2020, over half (58%) of Lucas County women over the age of 40 reported having a mammogram. In the past year, 55% of Lucas County women had a clinical breast exam, and 35% had a Pap smear to detect cancer of the cervix. More than one-third (39%) were obese, 34% had high blood pressure, 27% had high blood cholesterol, and 16% were identified as current smokers, all known risk factors for cardiovascular diseases.

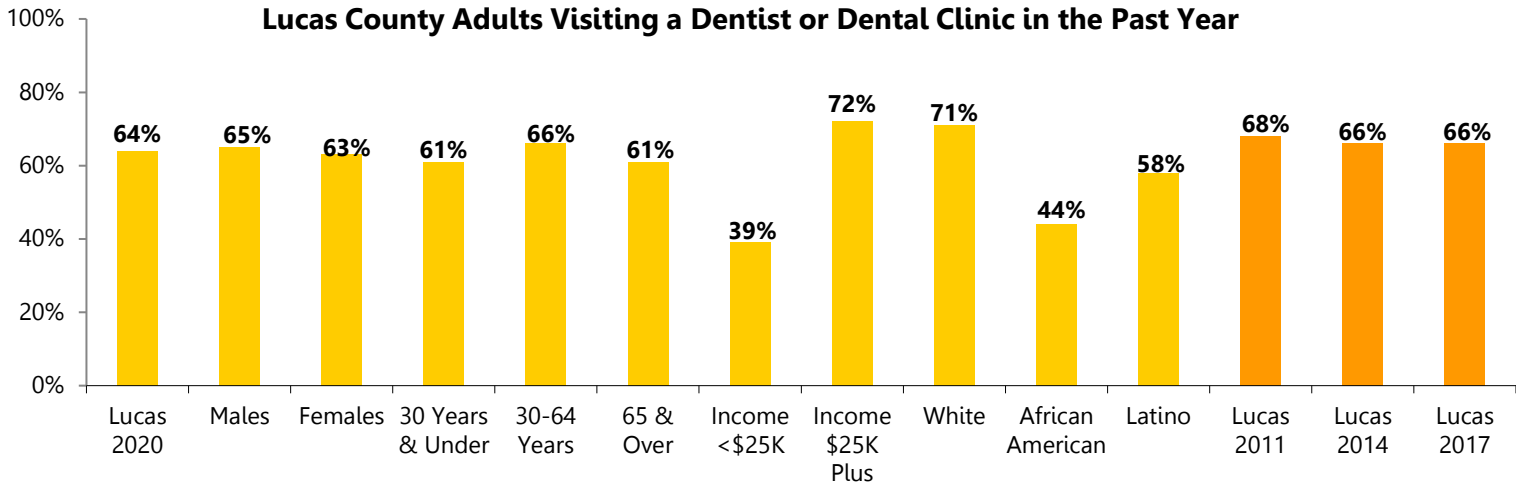


MEN'S HEALTH

More than half (58%) of Lucas County men had a digital rectal exam in their lifetime, and 17% had one in the past year. More than two-fifths (44%) of men had been diagnosed with high blood pressure, 27% had high blood cholesterol, and 14% were identified as smokers, which, along with obesity (36%), are known risk factors for cardiovascular diseases.

ORAL HEALTH

Sixty-four percent (64%) of Lucas County adults visited a dentist or dental clinic in the past year. One-fifth (20%) of adults did not see a dentist in the past year due to cost.

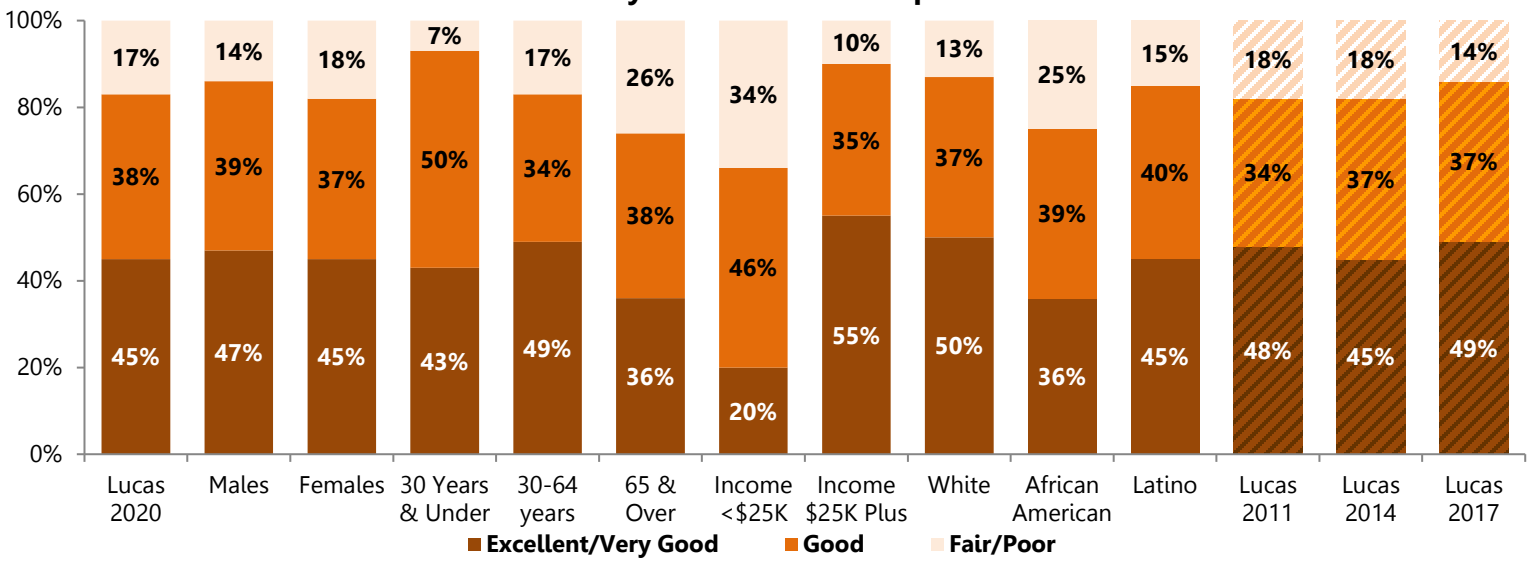


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

HEALTH STATUS PERCEPTIONS

In 2020, 45% of Lucas County adults rated their health status as excellent or very good. Conversely, 17% of adults described their health as fair or poor, increasing to 34% of those with annual incomes less than $25,000.

Lucas County Adult Health Perceptions*

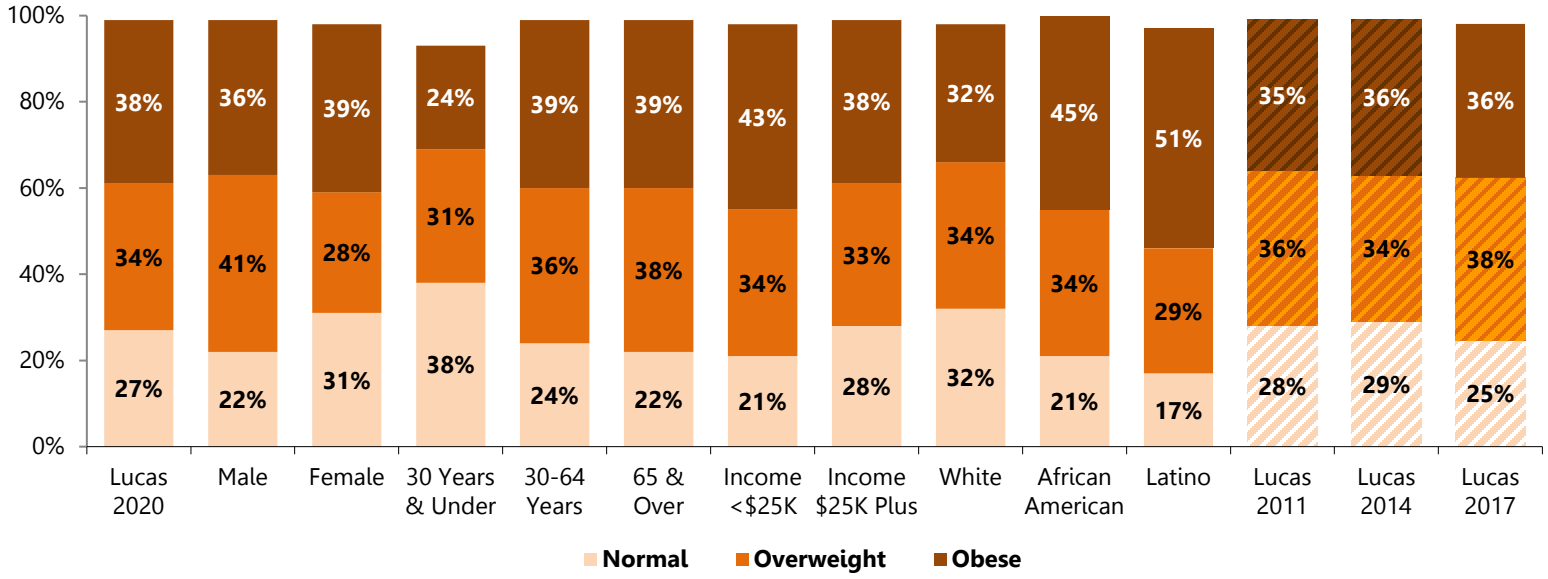


**Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"*

ADULT WEIGHT STATUS

Nearly three-fourths (72%) of Lucas County adults were overweight (34%) or obese (38%) based on body mass index (BMI). One-fourth (25%) of adults did not participate in any physical activity in the past week, including 3% who were unable to exercise.

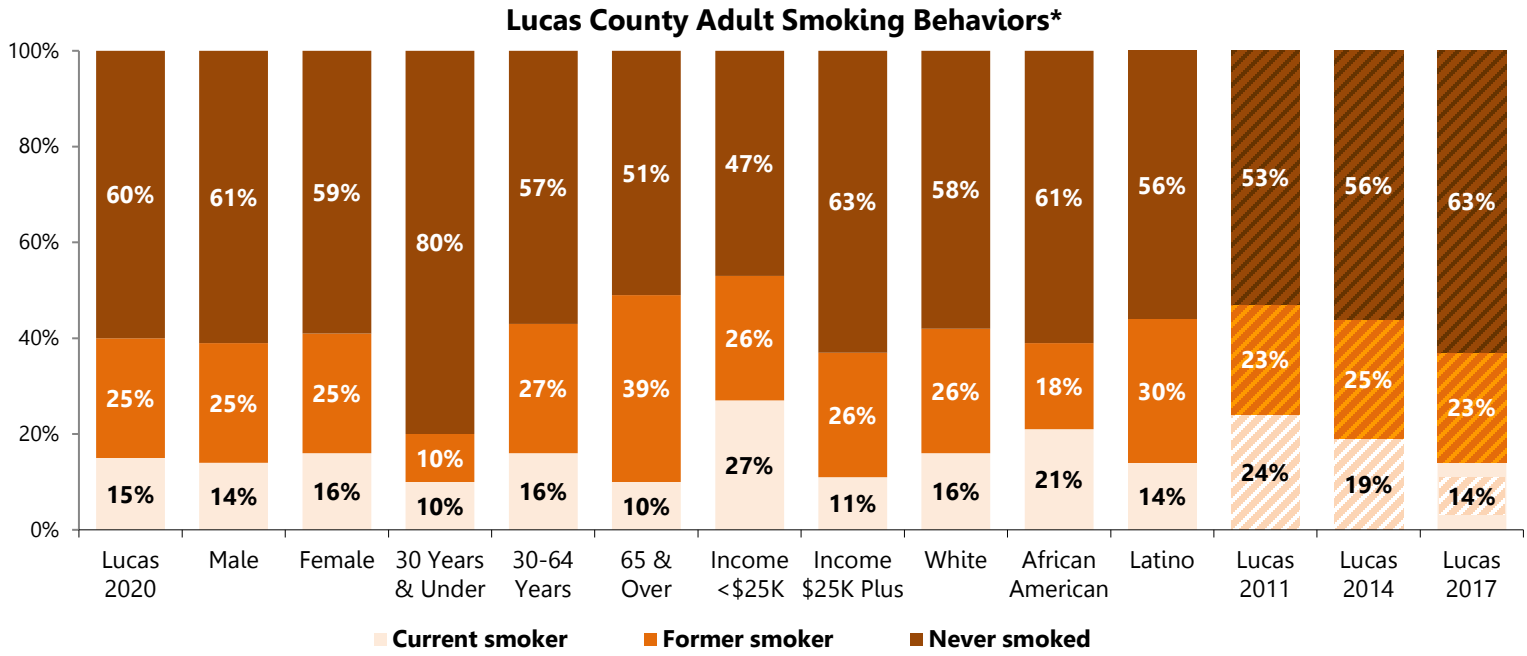
Lucas County Adult BMI Classifications*



**Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight.*
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT TOBACCO USE

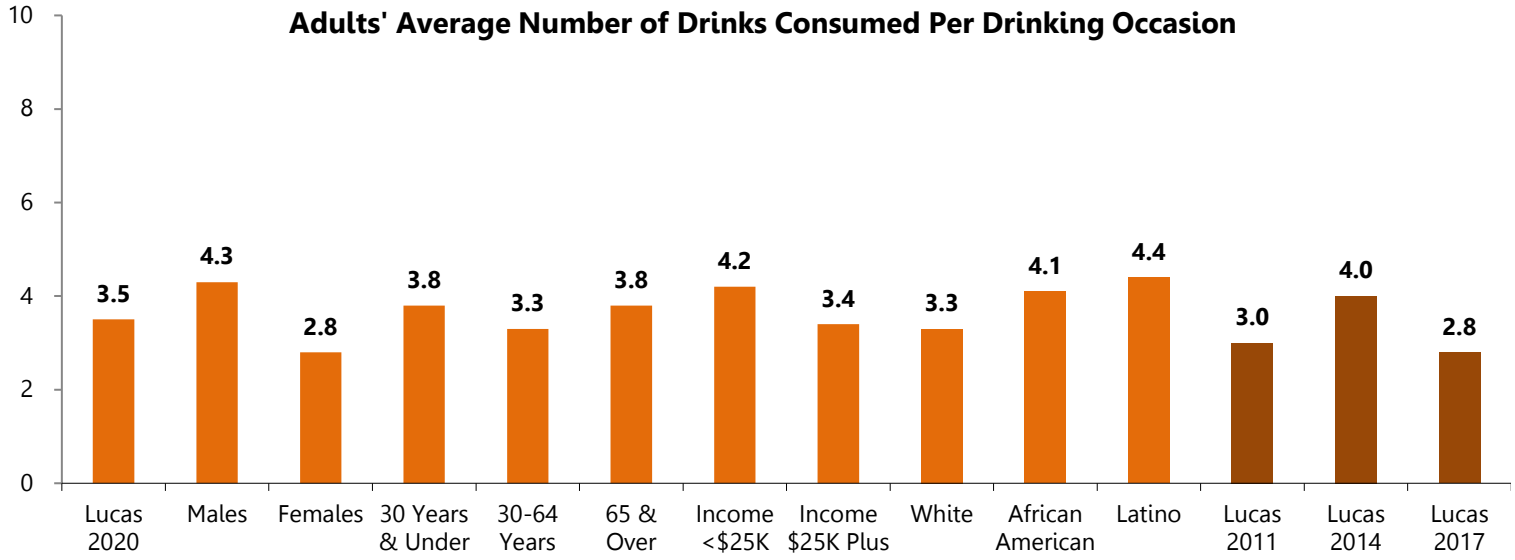
In 2020, 15% of Lucas County adults were current smokers, and 25% were considered former smokers. Four percent (4%) of adults used e-cigarettes or vapes in the past year. Seventy-six percent (76%) of adults reported they would support an ordinance to ban smoking in a vehicle with a minor present.



**Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"*

ADULT ALCOHOL USE

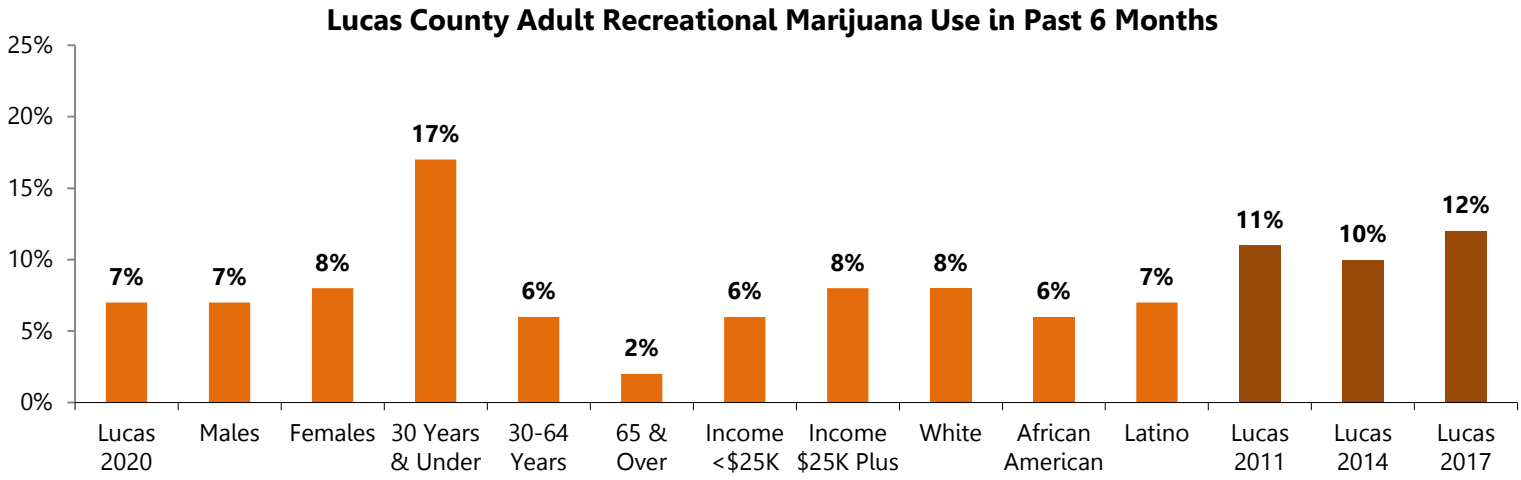
Sixty percent (60%) of Lucas County adults had at least one alcoholic drink in the past month. Twenty-two percent (22%) of adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on one occasion in the last month and would be considered binge drinkers.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT DRUG USE

In 2020, 16% of Lucas County adults reported they and/or an immediate family member or someone in their household used recreational marijuana during the past 6 months. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT SEXUAL BEHAVIOR

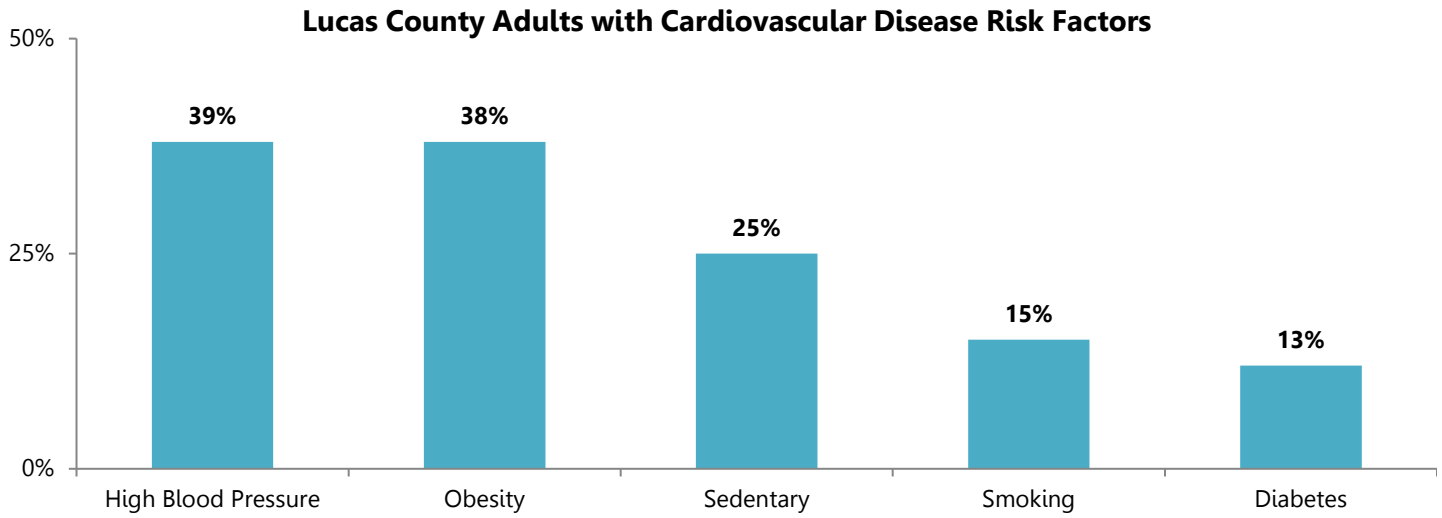
Sixty-three percent (63%) of Lucas County adults had sexual intercourse in the past year. Seven percent (7%) of adults had more than one partner. Nine percent (9%) of Lucas County adults were forced to have any sort of unwanted sexual activity, increasing to 13% of females and 16% of those with annual incomes less than $25,000.

ADULT MENTAL HEALTH

Five percent (5%) of Lucas County adults considered attempting suicide in the past year. During the past year, 24% of adults had a period of two or more weeks when they felt sad, blue or depressed.

CARDIOVASCULAR HEALTH

Four percent (4%) of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Thirty-nine percent (39%) had high blood pressure, 38% were obese, 27% had high blood cholesterol, and 15% were current smokers, which are four known risk factors for heart disease and stroke.



CANCER

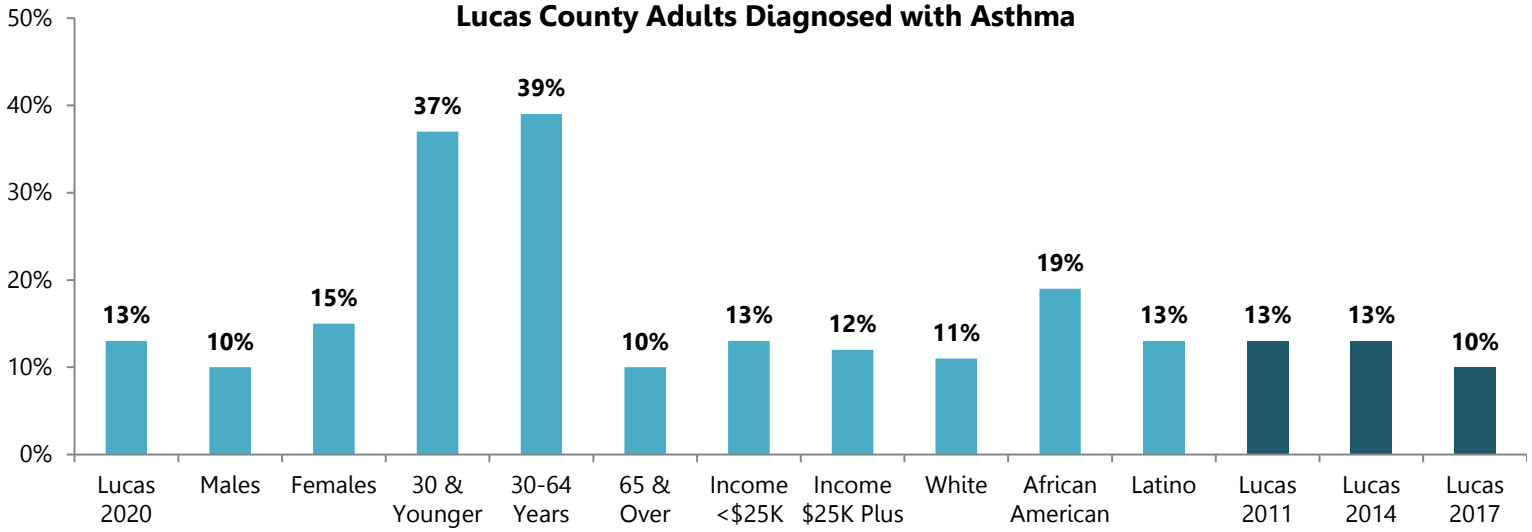
In 2020, 12% of Lucas County adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (2,980) of all (14,042) Lucas County resident deaths.

ARTHRITIS

Eighteen percent (18%) of Lucas County adults were diagnosed with arthritis.

ASTHMA

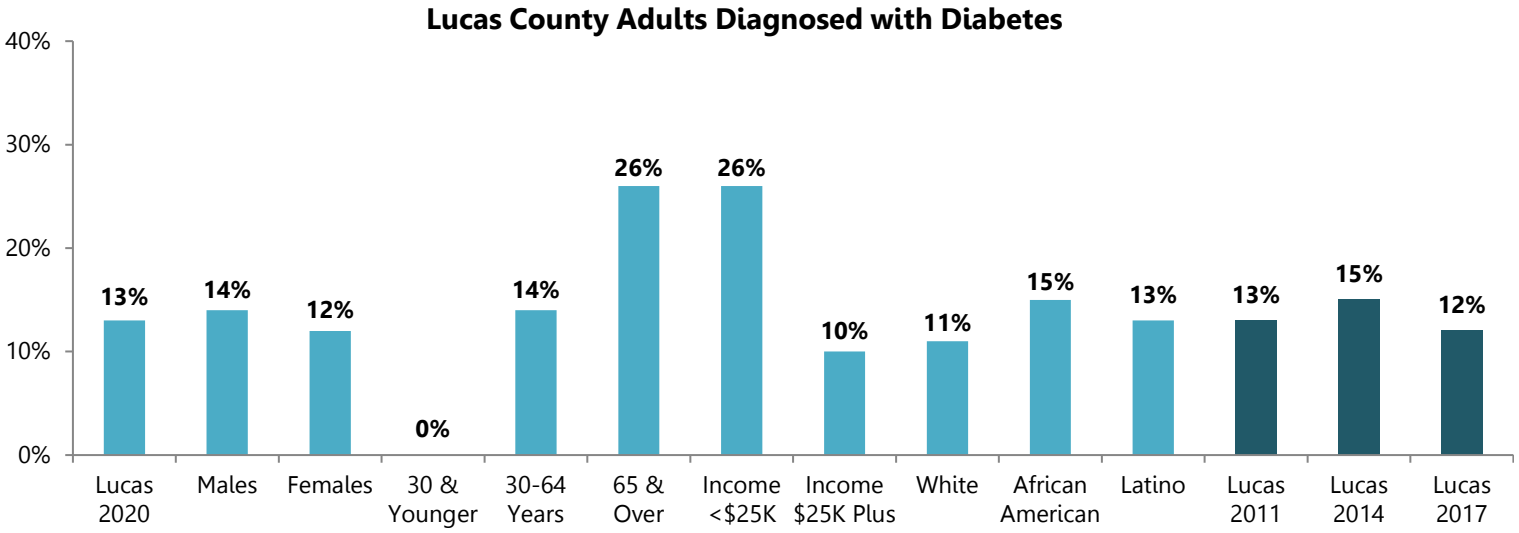
In 2020, 13% of Lucas County adults were diagnosed with asthma.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

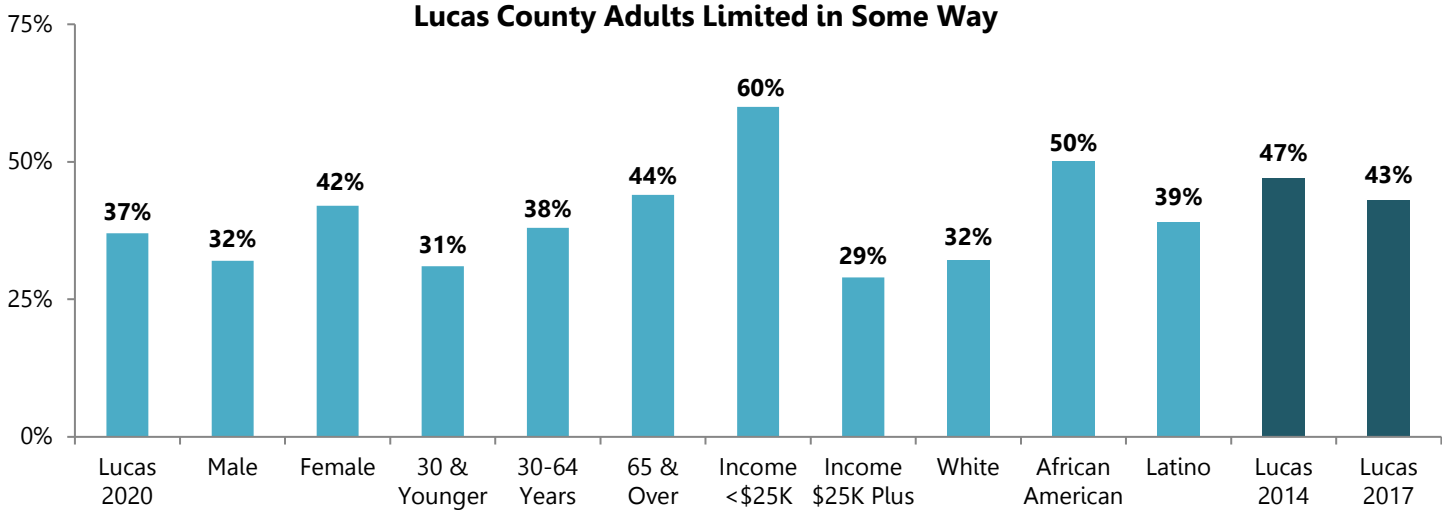
DIABETES

In 2020, 13% of Lucas County residents reported they had been diagnosed with diabetes at some time in their lifetime. More than one-third (37%) of adults with diabetes rated their health as fair or poor.



QUALITY OF LIFE

In 2020, 37% of Lucas County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (44%); arthritis/rheumatism (38%); stress, depression, anxiety and emotional problems (32%); chronic pain (25%); and sleep problems (22%).

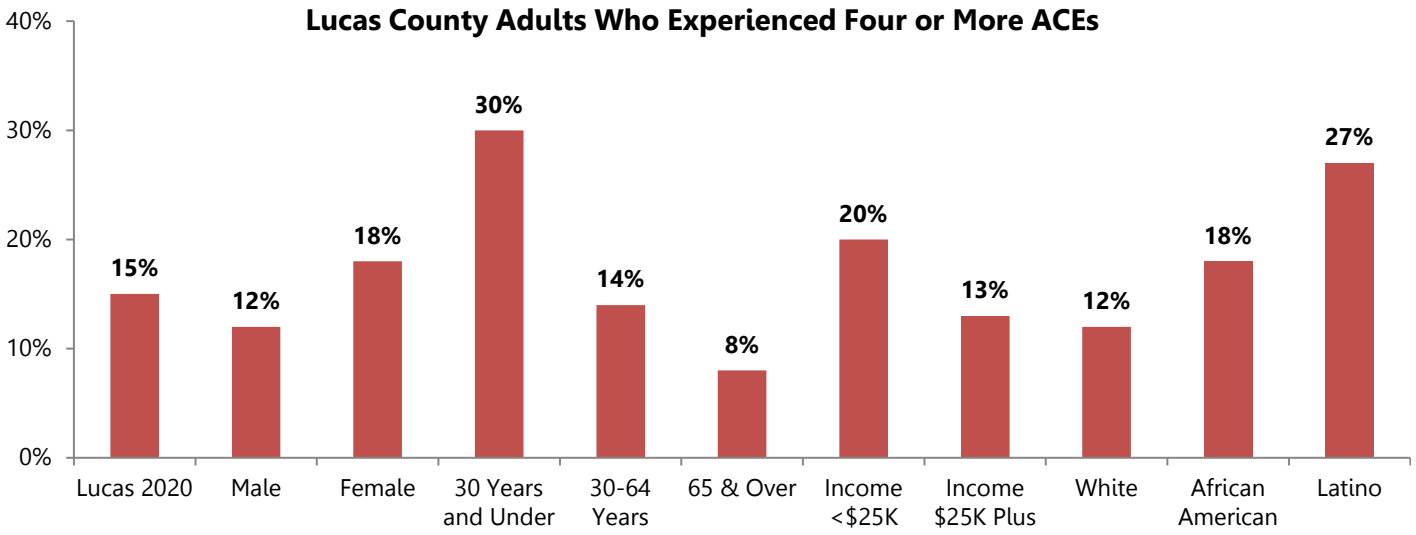


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Social Conditions

SOCIAL DETERMINANTS OF HEALTH

In 2020, 8% of Lucas County adults had to choose between paying bills and buying food. Fifteen percent (15%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime (ACEs are stressful or traumatic events, for example, parents becoming separated or divorced, or living with someone who was a problem drinker or alcoholic).



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

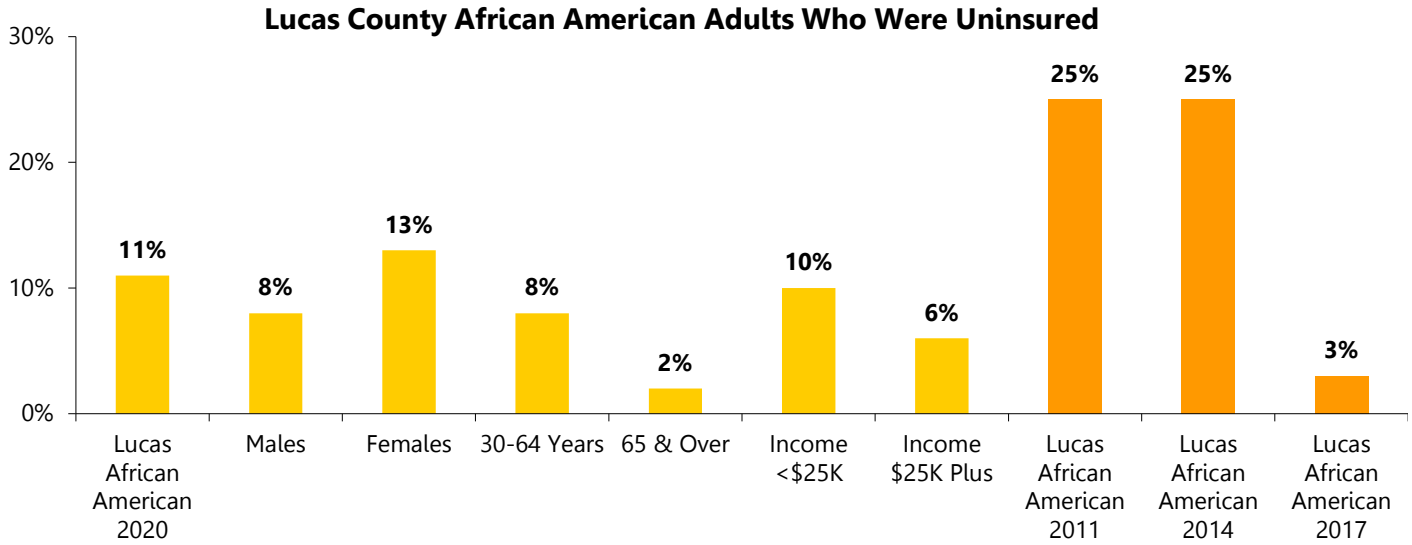
ENVIRONMENTAL HEALTH

Lucas County adults reported the following as the top four issues that threatened their health in the past year: bed bugs (8%), mold (8%), insects (7%), and rodents (6%). Ten percent (10%) of adults reported they had a disaster plan in preparation of a disaster.

African American Data Summary | Health Care Access

AFRICAN AMERICAN HEALTH CARE COVERAGE

In 2020, 11% of Lucas County African American adults were without health care coverage. Those most likely to be uninsured were females (13%) and those with annual incomes less than $25,000 (10%).

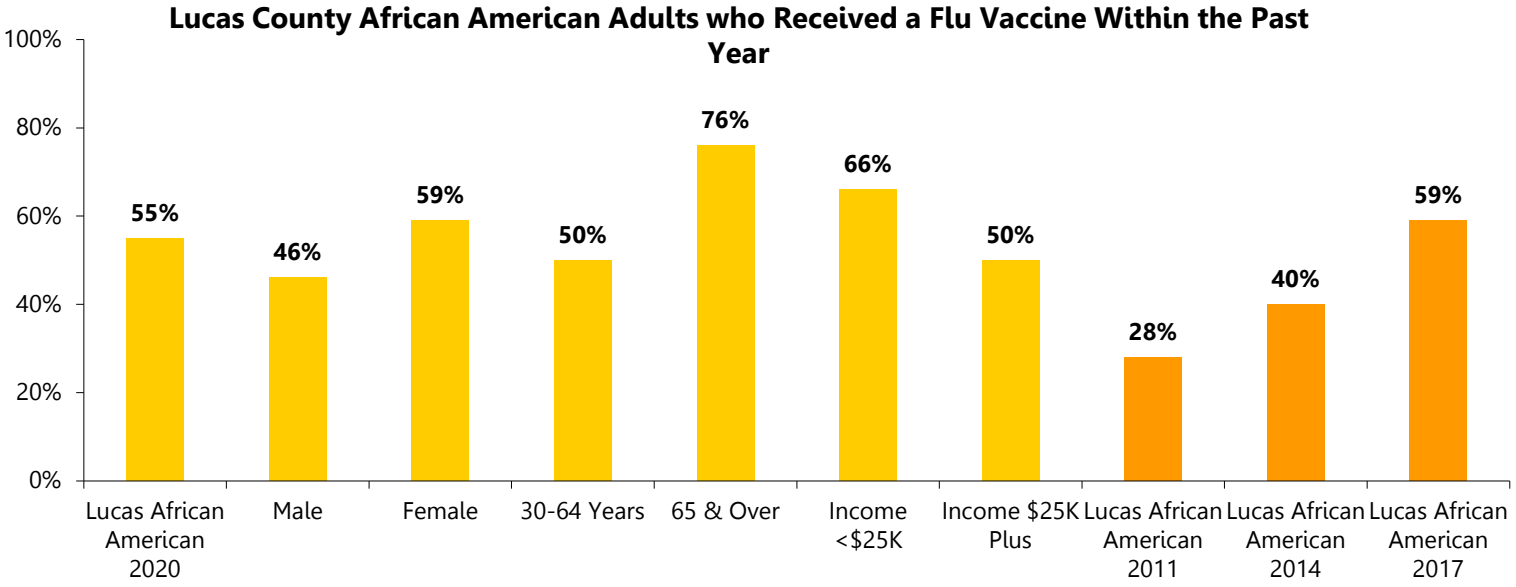


AFRICAN AMERICAN ACCESS AND UTILIZATION

One-fifth (20%) of Lucas County African American adults did not get their prescriptions from their doctor filled in the past year. Twenty-one percent (21%) of African American adults looked for a program to help with depression, anxiety, or some mental health problem.

AFRICAN AMERICAN PREVENTIVE MEDICINE

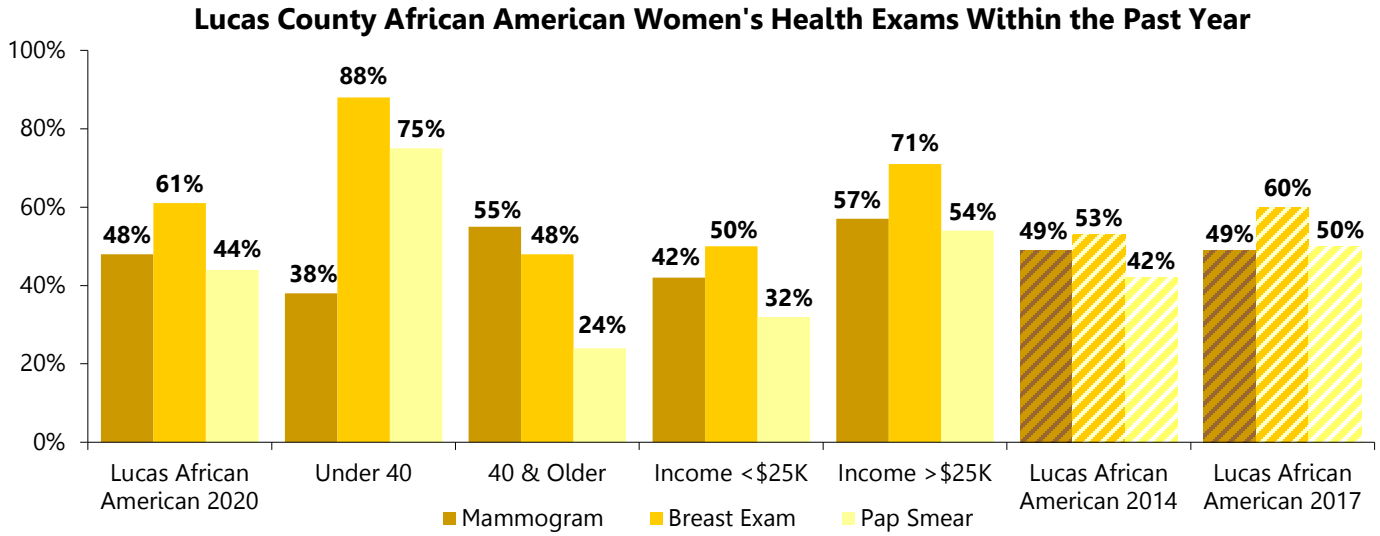
More than half (55%) of Lucas County African American adults had a flu vaccine during the past year. More than two-thirds (70%) of African American adults ages 65 and older had a pneumonia vaccine at some time in their life.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

AFRICAN AMERICAN WOMEN'S HEALTH

In 2020, over half (55%) of Lucas County African American women older than age 40 reported having a mammogram. Sixty-one percent (61%) of Lucas County African American women had a clinical breast exam, and 44% had a Pap smear to detect cancer of the cervix, in the past year. More than half (53%) had high blood pressure, 44% were obese, 30% had high blood cholesterol, and 22% were identified as current smokers, which are known risk factors for cardiovascular diseases.

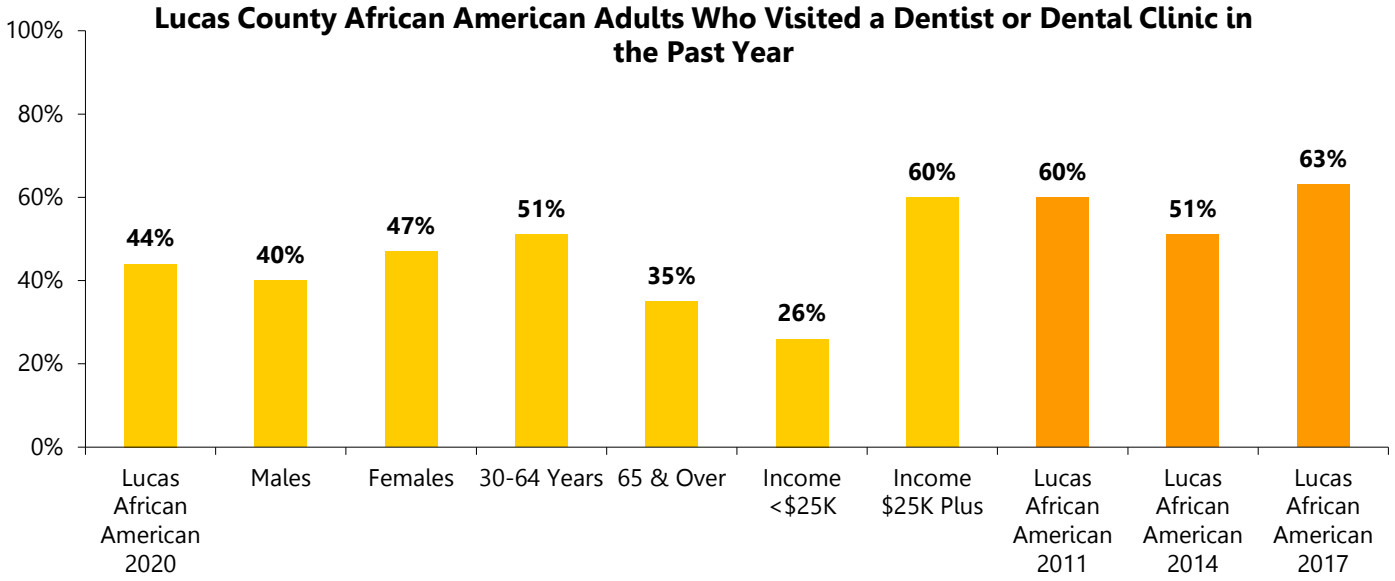


AFRICAN AMERICAN MEN'S HEALTH

More than three fourths (76%) of Lucas County African American men had a digital rectal exam in their lifetime, and 22% had one in the past year. More than half (57%) of African American men had been diagnosed with high blood pressure, 31% had high blood cholesterol, and 18% were identified as smokers, which, along with obesity (43%), are known risk factors for cardiovascular diseases.

AFRICAN AMERICAN ORAL HEALTH

Forty-four percent (44%) of Lucas County African American adults visited a dentist or dental clinic in the past year. Eleven percent (11%) of African American adults did not see a dentist in the past year due to cost.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

African American Data Summary | Health Behaviors

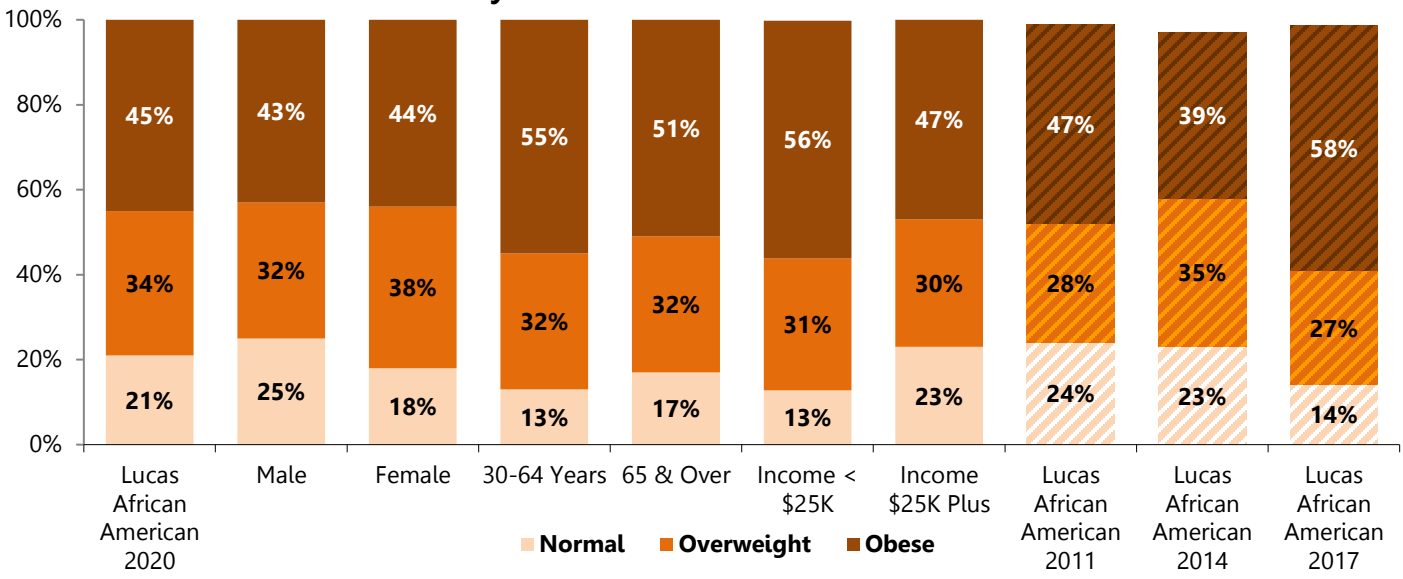
AFRICAN AMERICAN HEALTH STATUS PERCEPTIONS

In 2020, 36% of Lucas County African American adults rated their health status as excellent or very good. Conversely, 25% of African American adults described their health as fair or poor, increasing to 33% of those with annual incomes less than $25,000.

AFRICAN AMERICAN ADULT WEIGHT STATUS

Nearly four-fifths (79%) of Lucas County African American adults were overweight or obese based on body mass index (BMI). Twenty-nine percent (29%) of African American adults did not participate in any physical activity in the past week, including 2% who were unable to exercise.

Lucas County African American Adult BMI Classifications*



**Note: Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight.*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

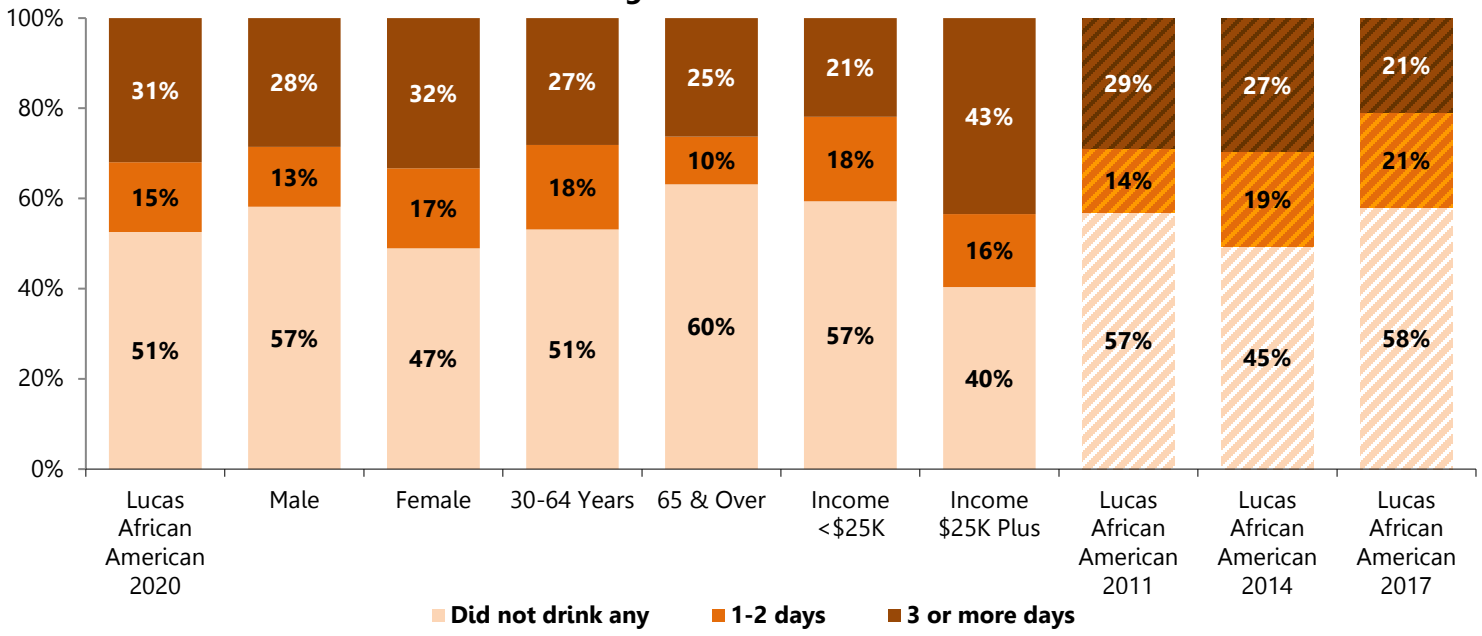
AFRICAN AMERICAN ADULT TOBACCO USE

In 2020, 21% of Lucas County African American adults were current smokers, and 18% were considered former smokers. Three percent (3%) of African American adults used e-cigarettes or vapes in the past year.

AFRICAN AMERICAN ADULT ALCOHOL CONSUMPTION

Nearly half (46%) of Lucas County African American adults had at least one alcoholic drink in the past month. One-fifth (20%) of African American adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.

Lucas County African American Adults Average Number of Days Drinking Alcohol in the Past Month*

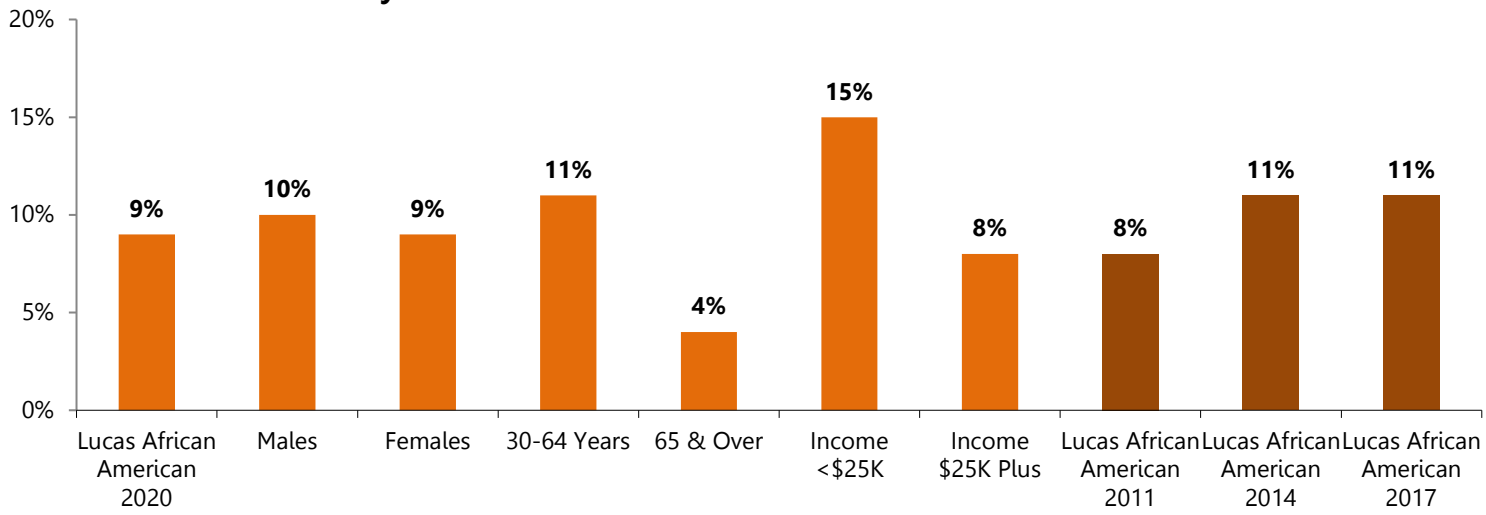


**Percentages may not equal 100% as some respondents answered "don't know."*

AFRICAN AMERICAN ADULT DRUG USE

In 2020, 11% of Lucas County African American adults had used recreational marijuana during the past 6 months. Nine percent (9%) of African American adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

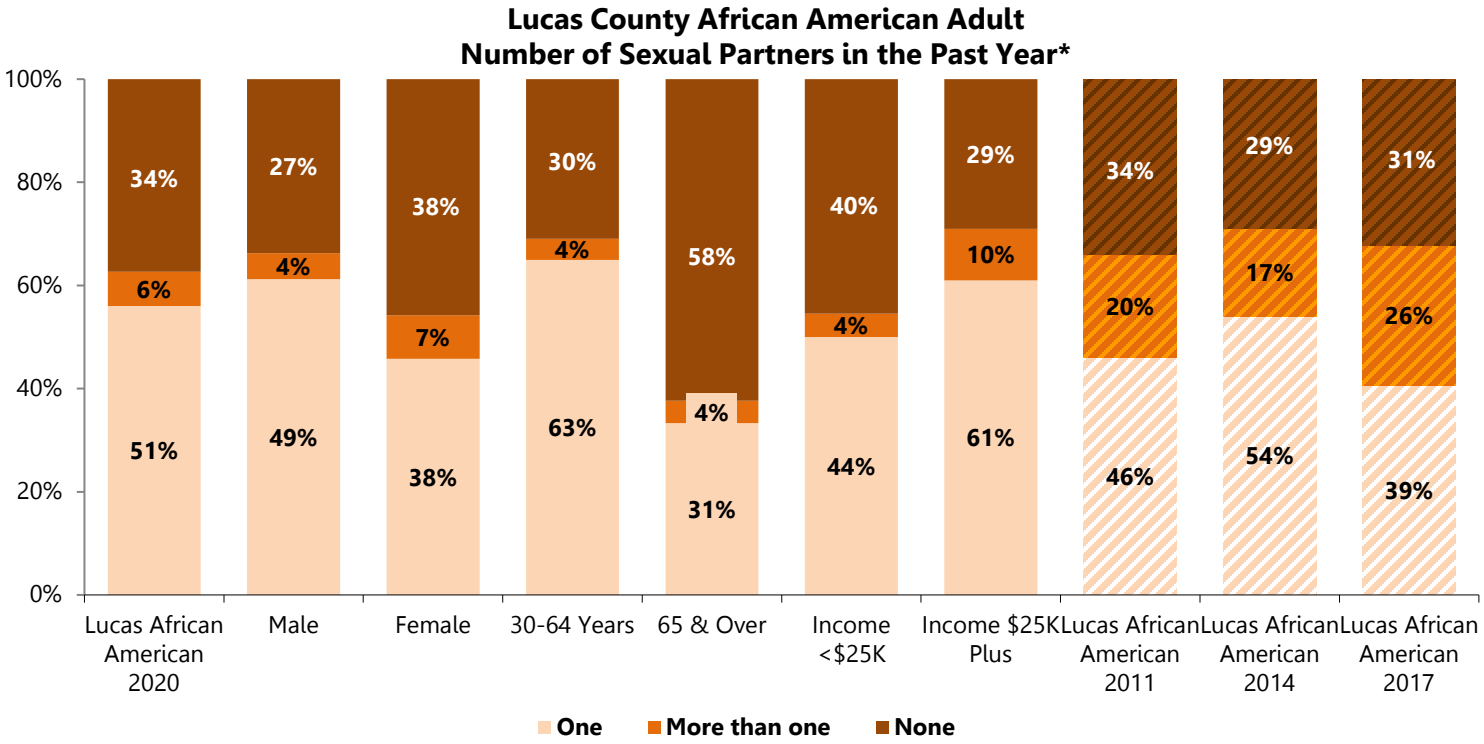
Lucas County African American Adult Medication Misuse in the Past 6 Months



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

AFRICAN AMERICAN ADULT SEXUAL BEHAVIOR

In 2020, 57% of Lucas County African American adults had sexual intercourse. Six percent (6%) of African American adults had more than one partner.



**Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"*
Note: Percentages may not equal 100% as some respondents answered "don't know"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

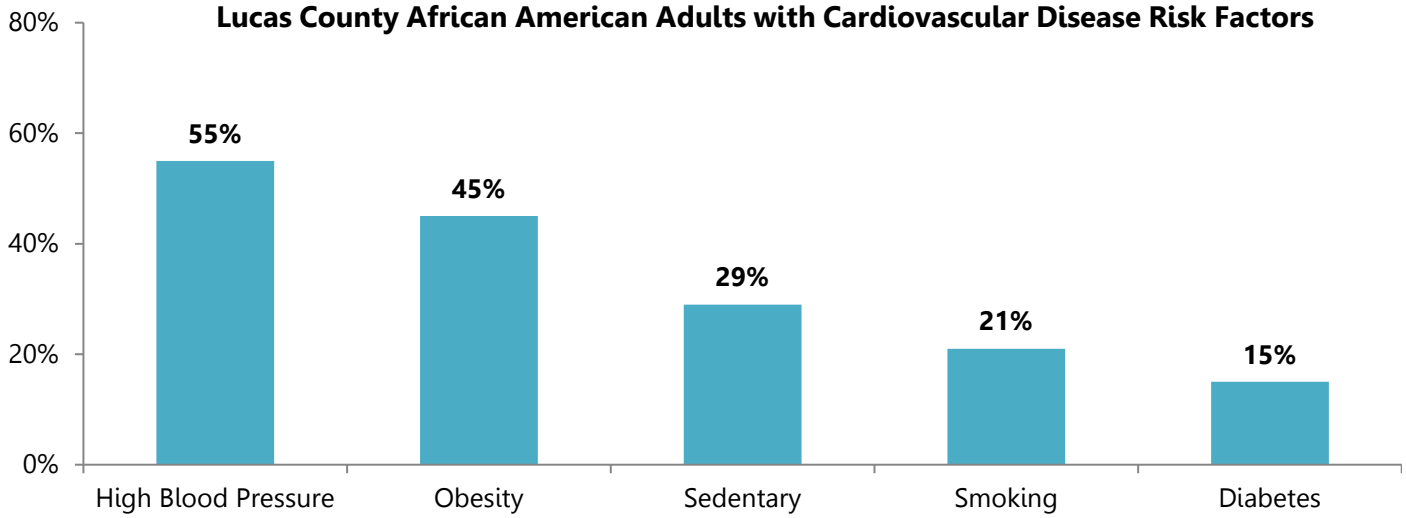
AFRICAN AMERICAN ADULT MENTAL HEALTH

Nine percent (9%) of Lucas County African American adults seriously considered attempting suicide in the past year. During the past year, 23% of African American adults had a period of two or more weeks when they felt sad, blue or depressed.

African American Data Summary | Chronic Disease

AFRICAN AMERICAN CARDIOVASCULAR HEALTH

Five percent (5%) of Lucas County African American adults had survived a heart attack and 4% had survived a stroke at some time in their life. Fifty-five percent (55%) of African American adults had high blood pressure, 45% were obese, 31% had high blood cholesterol, and 21% were current smokers, which are four known risk factors for heart disease and stroke.

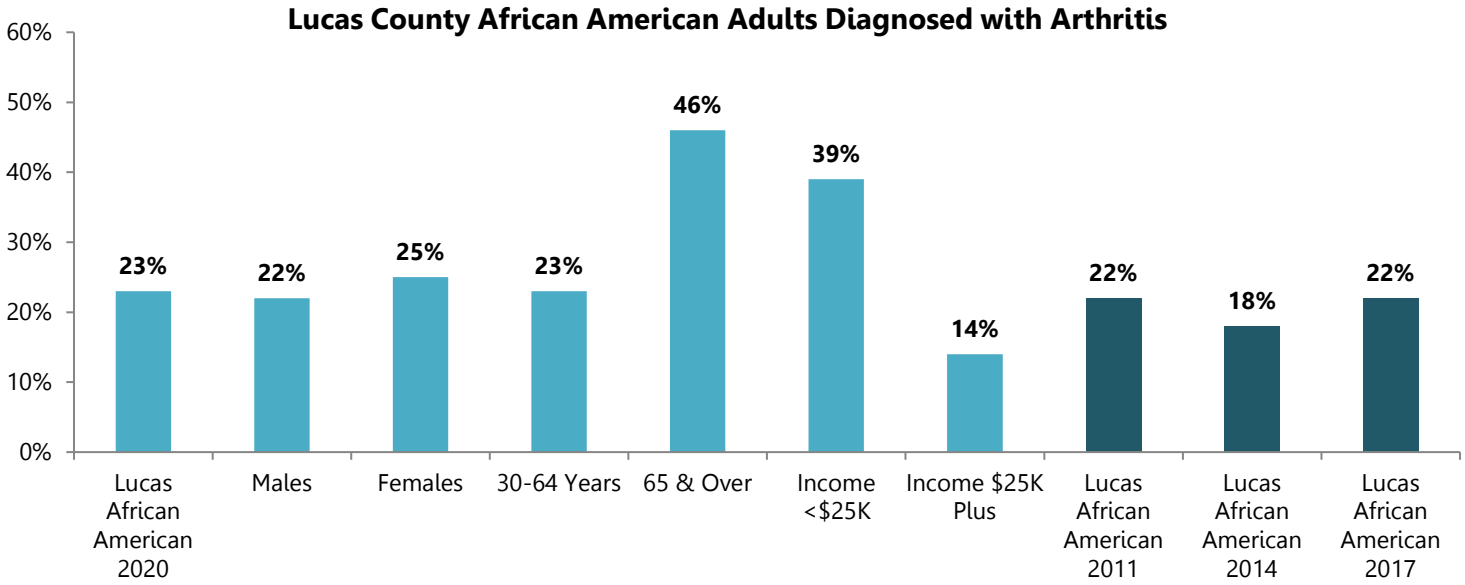


AFRICAN AMERICAN CANCER

In 2020, 11% of Lucas County African American adults were diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (533) of all (2,543) Lucas County African American resident deaths.

AFRICAN AMERICAN ARTHRITIS

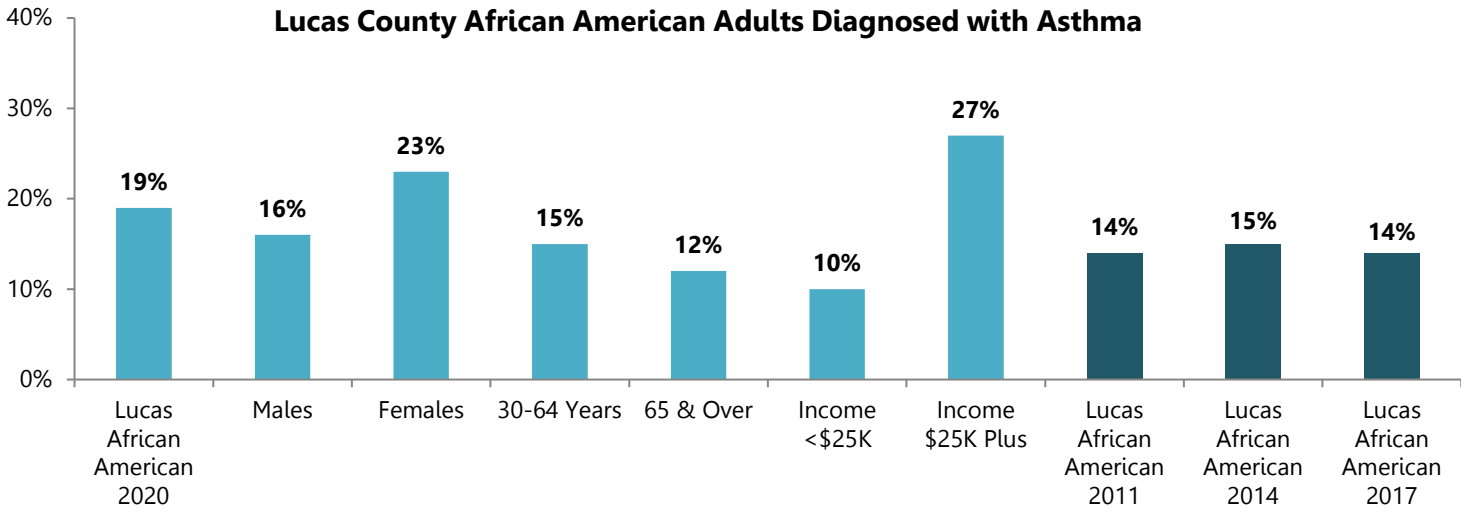
Twenty-three percent (23%) of Lucas County African American adults were diagnosed with arthritis.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

AFRICAN AMERICAN ASTHMA

In 2020, 19% of Lucas County African American adults were diagnosed with asthma.

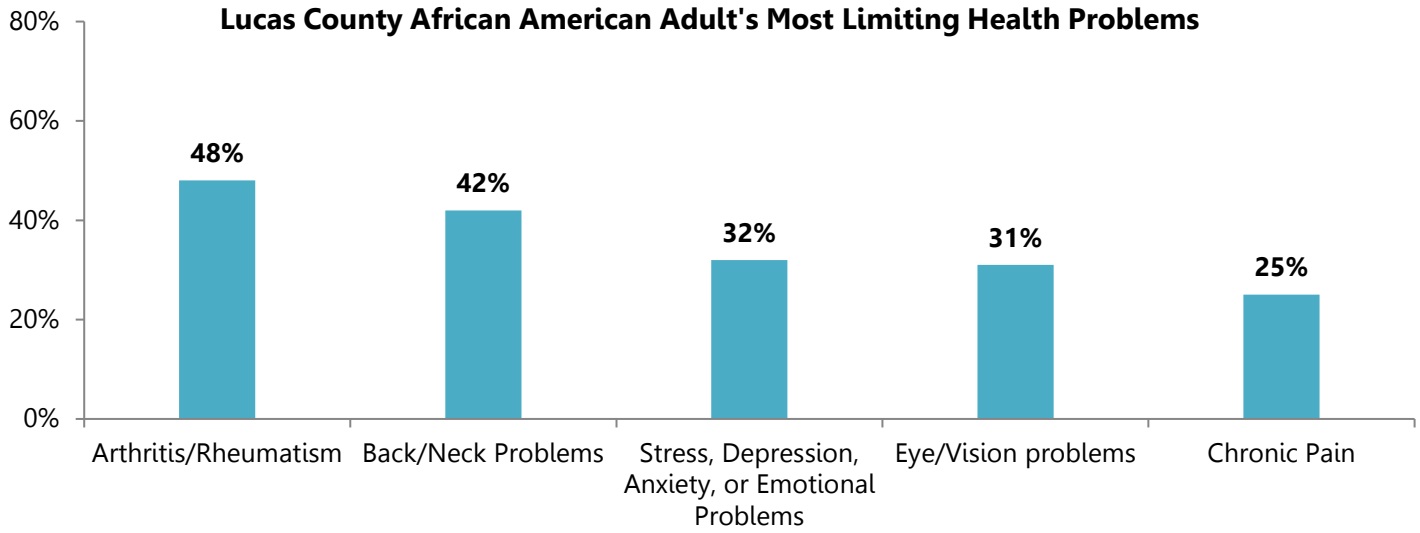


AFRICAN AMERICAN DIABETES

In 2020, 15% of Lucas County African American adults were diagnosed with diabetes at some point in their lifetme. Thirty-eight percent (38%) of African American adults with diabetes rated their health as fair or poor.

AFRICAN AMERICAN QUALITY OF LIFE

In 2020, 45% of Lucas County African American adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were arthritis/rheumatism (48%); back or neck problems (42%); stress, depression, anxiety and emotional problems (32%); vision problems (31%); and chronic pain (25%).

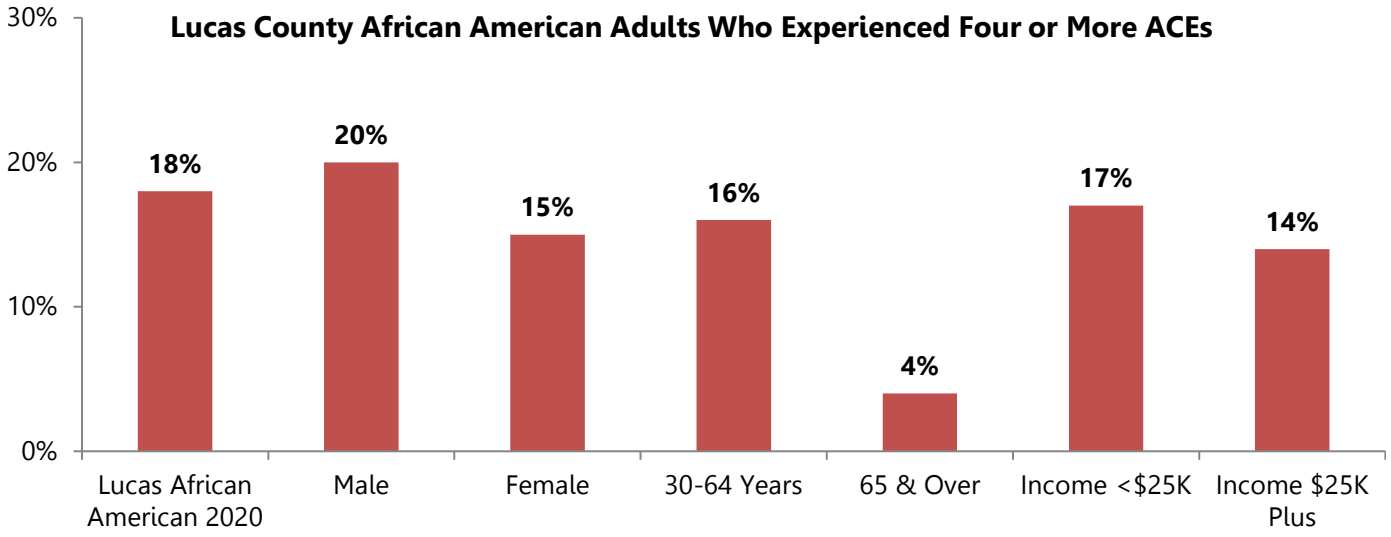


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

African American Data Summary | Social Conditions

AFRICAN AMERICAN SOCIAL DETERMINANTS OF HEALTH

In 2020, 19% of Lucas County African American adults had to choose between paying bills and buying food. Eighteen percent (18%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime (ACEs are stressful or traumatic events, for example, parents becoming separated or divorced, or living with someone who was a problem drinker or alcoholic).



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

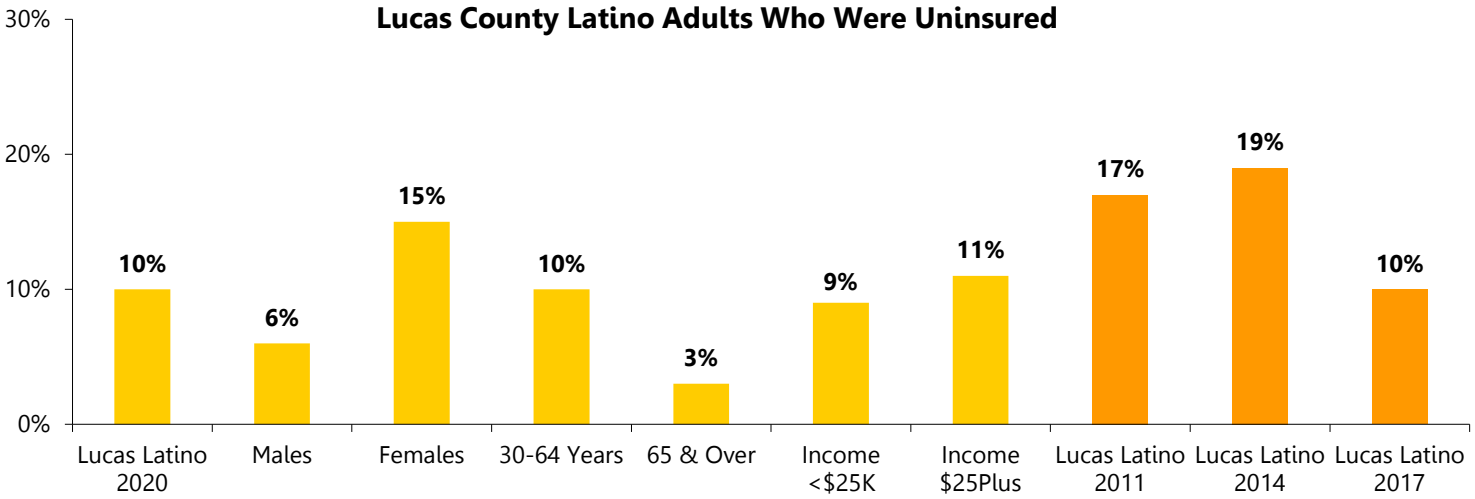
AFRICAN AMERICAN ENVIRONMENTAL HEALTH

Lucas County African American adults reported the following as the top four issues that threatened their health in the past year: mold (8%), bed bugs (8%), insects (7%), and rodents (6%). Eight percent (8%) of African American adults reported they had a disaster plan in preparation of a disaster.

Latino Data Summary | Health Care Access

LATINO HEALTH CARE COVERAGE

Ten percent (10%) of Lucas County Latino adults were without health care coverage in 2020. Those most likely to be uninsured were females (15%) and those with an annual income level of $25,000 or more (11%).

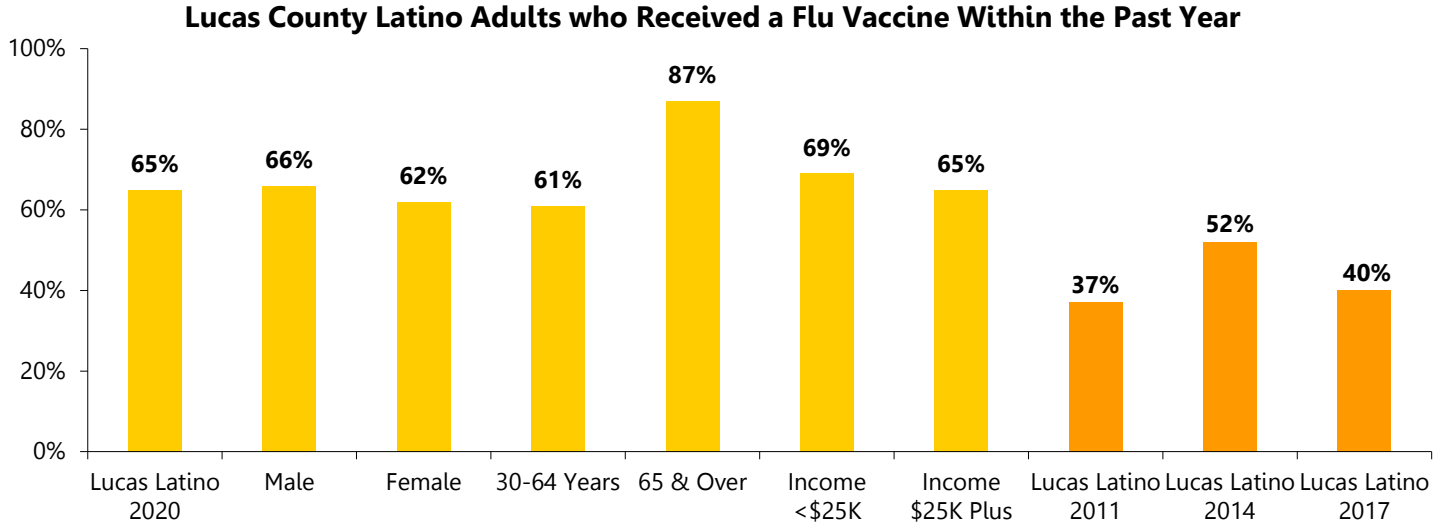


LATINO ACCESS AND UTILIZATION

Ten percent (10%) of Lucas County Latino adults went outside of Lucas County for health care services in the past year. Twenty-one percent (21%) of Latino adults looked for a program to help with depression, anxiety, or some mental health problem.

LATINO PREVENTIVE MEDICINE

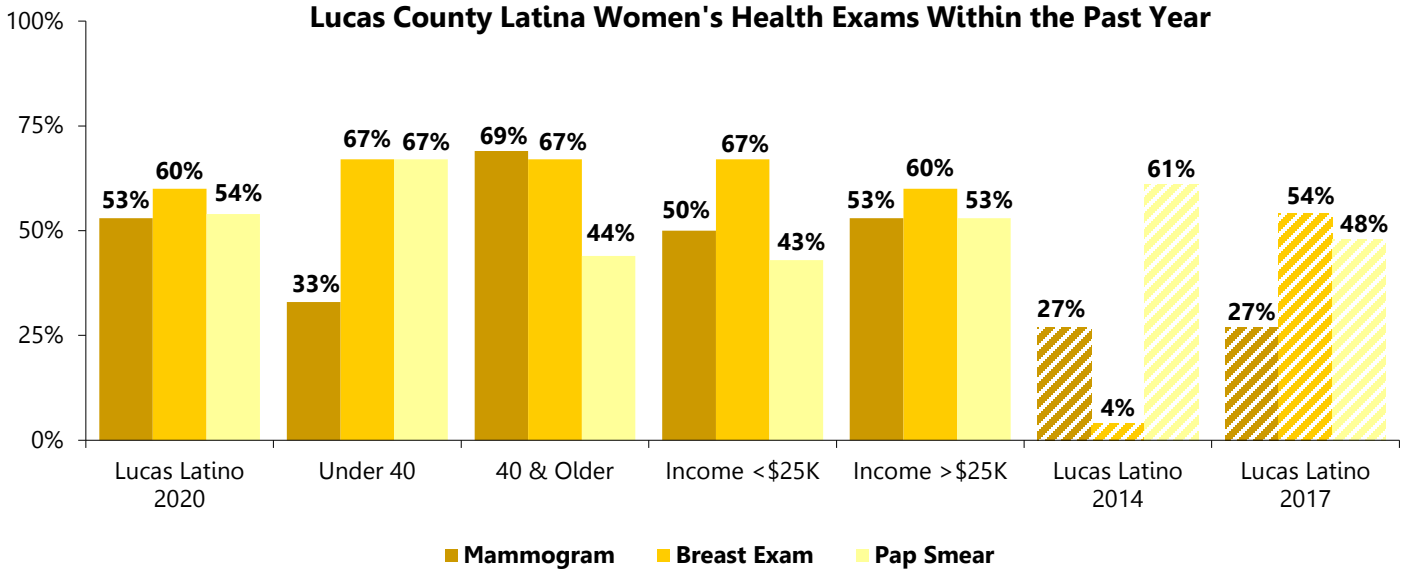
Sixty-five percent (65%) of Lucas County Latino adults had a flu vaccine during the past year. Seventy percent (70%) of Latino adults ages 65 and older had a pneumonia vaccine at some time in their life.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

LATINA WOMEN'S HEALTH

In 2020, 69% of Lucas County Latina women older than the age of 40 reported having a mammogram. Sixty percent (60%) of Lucas County Latina women had a clinical breast exam, and 54% had a Pap smear to detect cancer of the cervix, in the past year. More than half (56%) were obese, 27% had high blood pressure,18% had high blood cholesterol, and 14% were identified as current smokers, which are known risk factors for cardiovascular diseases.

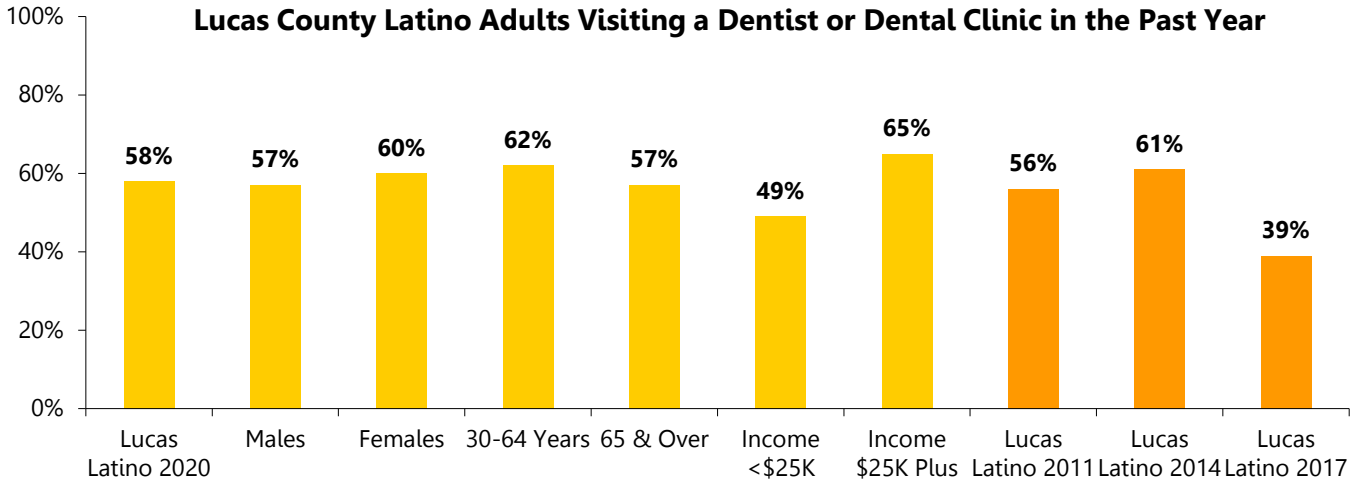


LATINO MEN'S HEALTH

Forty-two percent (42%) of Lucas County Latino men had a digital rectal exam in their lifetime, and 5% had one in the past year. More than one-third (35%) of Latino men had been diagnosed with high blood pressure, 23% had high blood cholesterol, and 15% were identified as smokers, which, along with obesity (48%), are known risk factors for cardiovascular diseases.

LATINO ORAL HEALTH

Fifty-eight percent (58%) of Lucas County Latino adults visited a dentist or dental clinic in the past year. Seventeen percent (17%) of Latino adults did not see a dentist in the past year due to cost.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Latino Data Summary | Health Behaviors

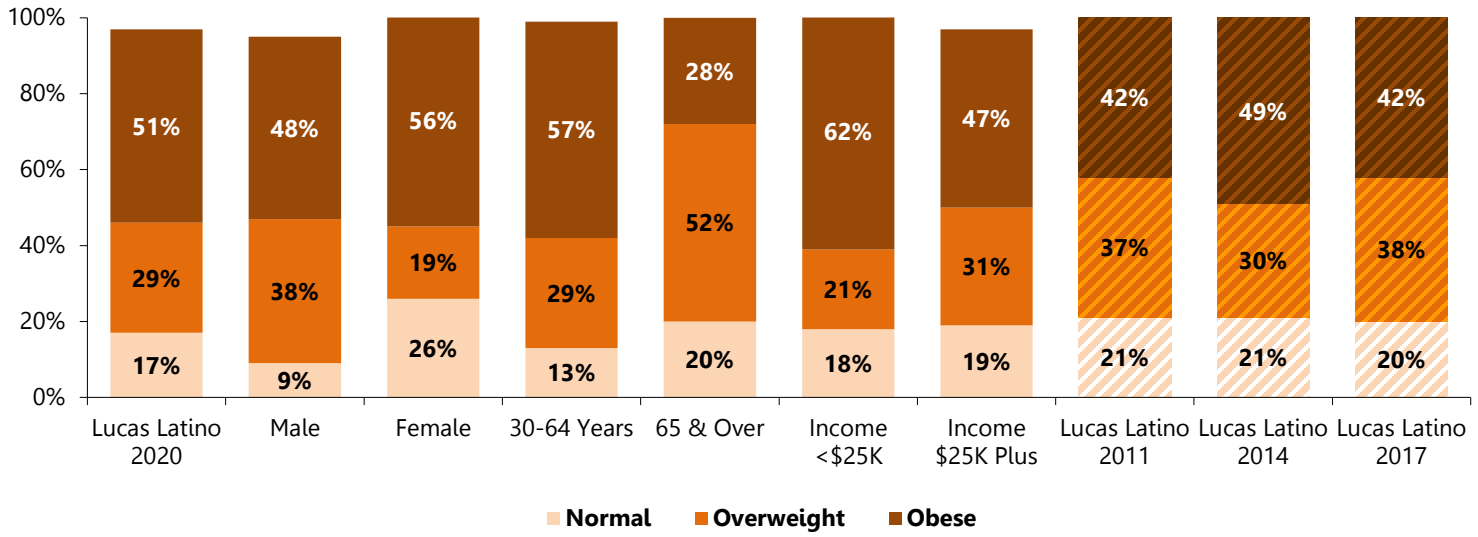
LATINO HEALTH STATUS PERCEPTIONS

In 2020, 45% of Lucas County Latino adults rated their health status as excellent or very good. Conversely,15% of Latino adults described their health as fair or poor, increasing to 27% of those with annual incomes less than $25,000.

LATINO ADULT WEIGHT STATUS

Eighty percent (80%) of Lucas County Latino adults were overweight or obese based on body mass index (BMI). Twenty-nine percent (29%) of Latino adults did not participate in any physical activity in the past week, including 1% who were unable to exercise.

Lucas County Latino Adult BMI Classifications*



**Note: Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

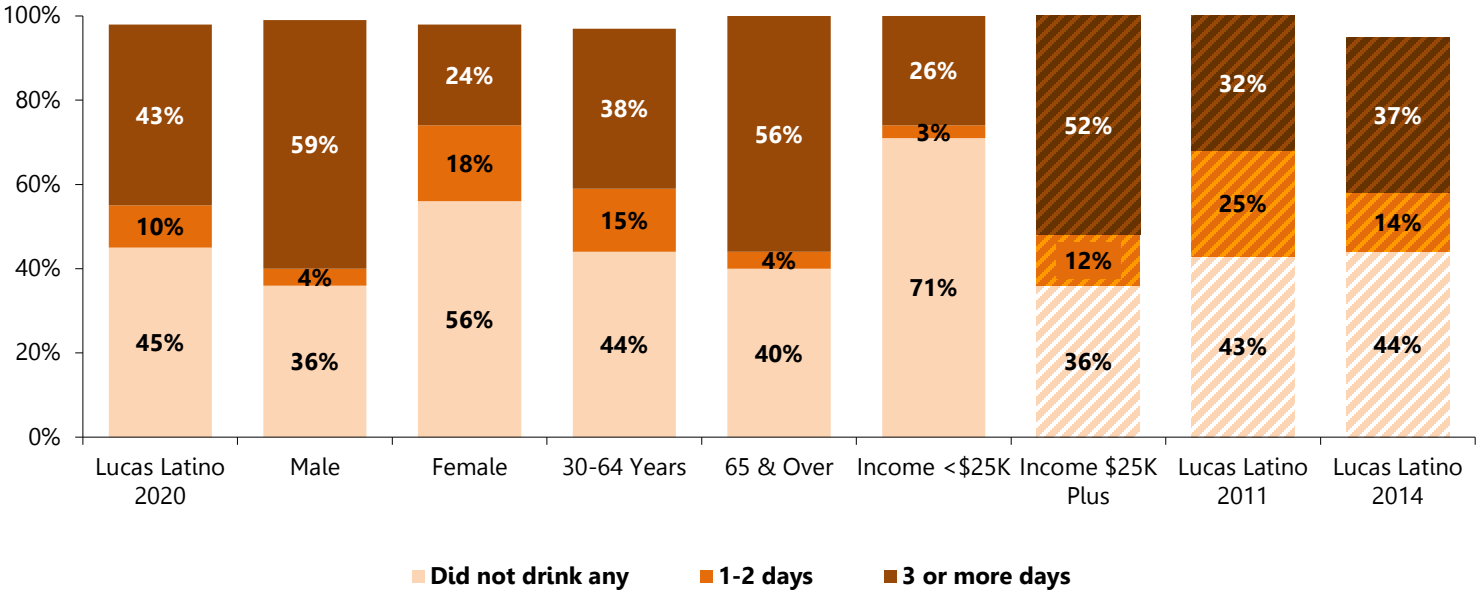
LATINO ADULT TOBACCO USE

In 2020, 14% of Lucas County Latino adults were current smokers, and 30% were considered former smokers. One-fourth (25%) of Latino adults used cigarettes in the past year. Forty-two percent (42%) of Latino current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

LATINO ADULT ALCOHOL CONSUMPTION

More than half (53%) of Lucas County Latino adults had at least one alcoholic drink in the past month. More than one-third (37%) of Latino adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.

Lucas County Latino Adults Average Number of Days Drinking Alcohol in the Past Month*

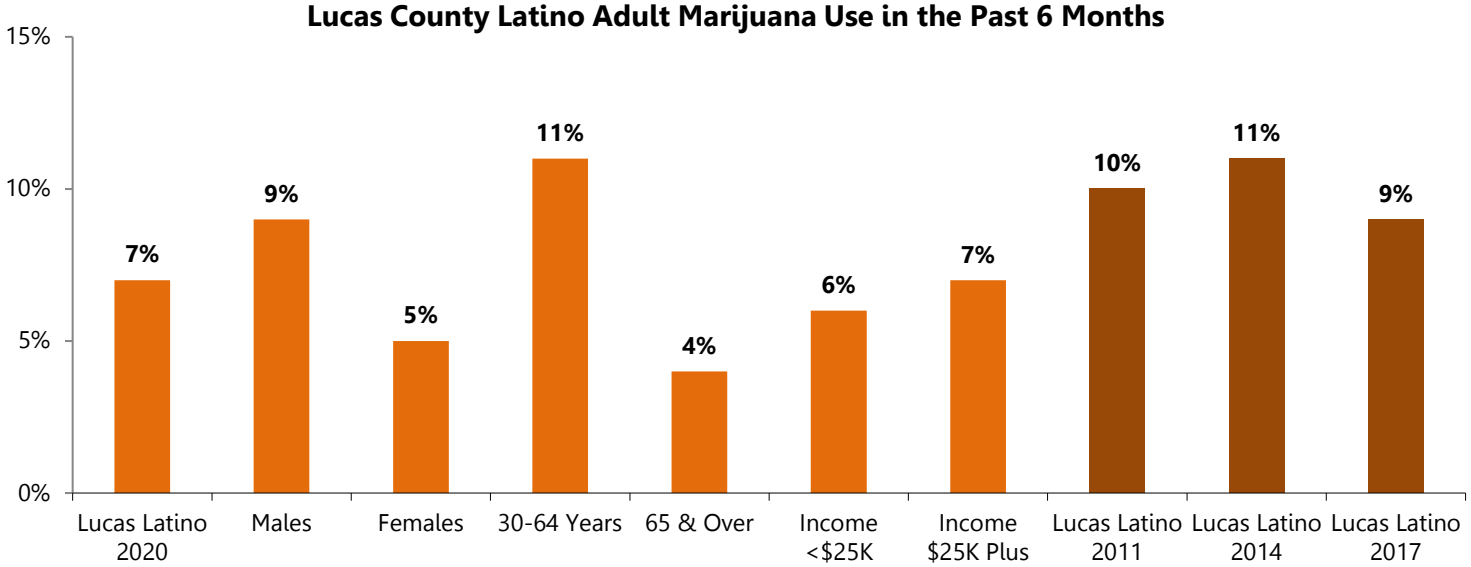


**Percentages may not equal 100% as some respondents answered "don't know"*

LATINO ADULT DRUG USE

Seven percent (7%) of Lucas County Latino adults had used recreational marijuana during the past 6 months. Six percent (6%) of Latino adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Lucas County Latino Adult Marijuana Use in the Past 6 Months

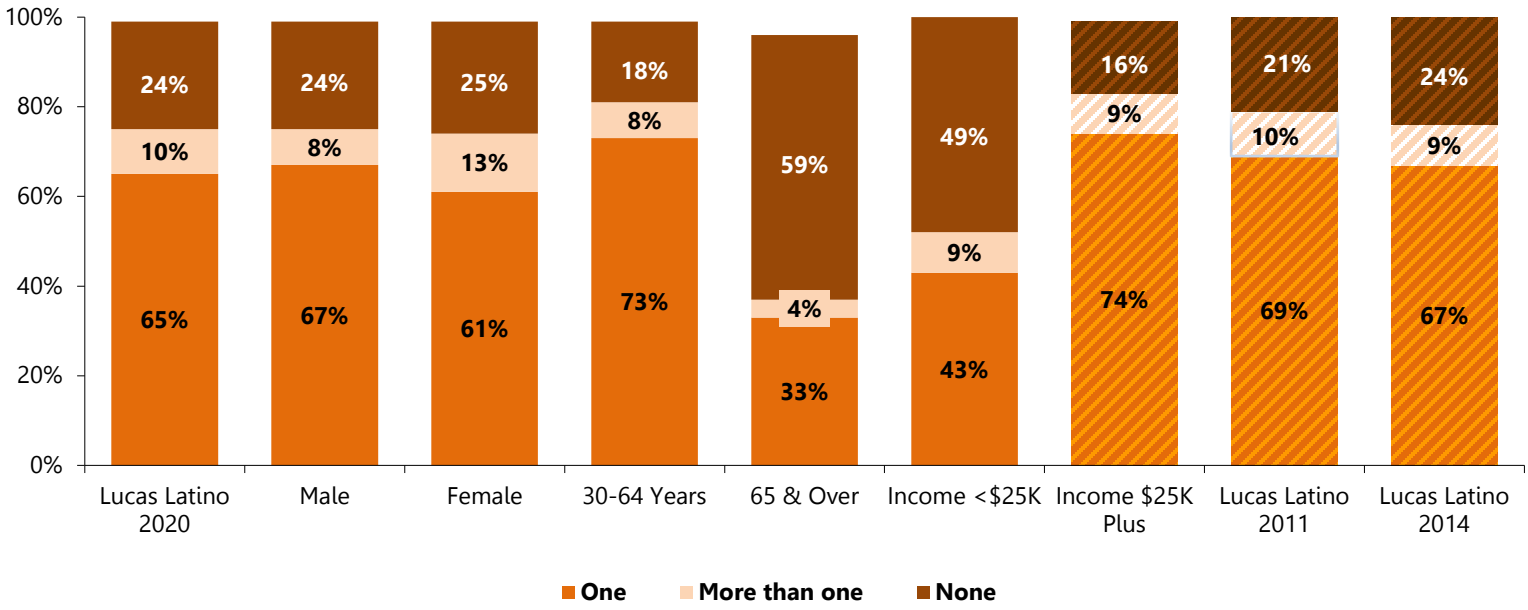


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

LATINO ADULT SEXUAL BEHAVIOR

Seventy-five percent (75%) of Lucas County Latino adults had sexual intercourse in the past year. Ten percent (10%) of Latino adults had more than one partner.

Lucas County Latino Number of Sexual Partners in the Past Year*



**Percentages may not equal 100% as some respondents answered "don't know."*
Note: Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

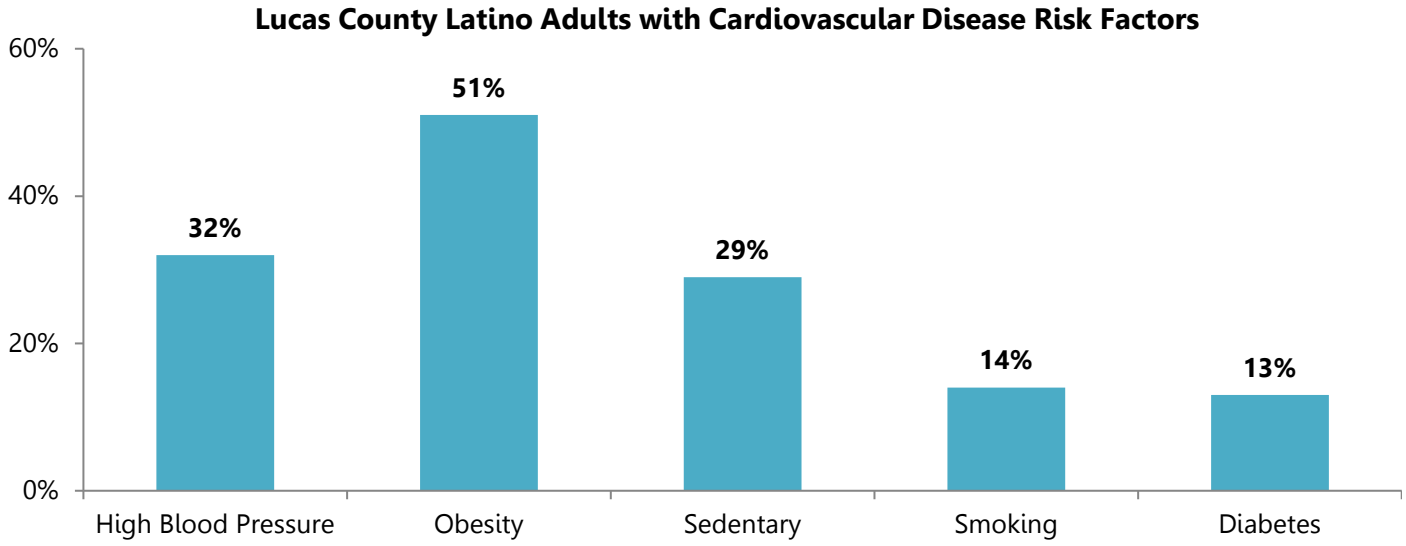
LATINO ADULT MENTAL HEALTH

Four percent (4%) of Lucas County Latino adults considered attempting suicide in the past year. During the past year, 29% of Latino adults had a period of two or more weeks when they felt sad, blue or depressed.

Latino Data Summary | Chronic Disease

LATINO CARDIOVASCULAR HEALTH

Six percent (6%) of Lucas County Latino adults had survived a heart attack and 5% had survived a stroke at some time in their life. Fifty-one percent (51%) of adults were obese, 32% had high blood pressure, 21% had high blood cholesterol, and 14% were current smokers, all four of which are known risk factors for heart disease and stroke.



LATINO CANCER

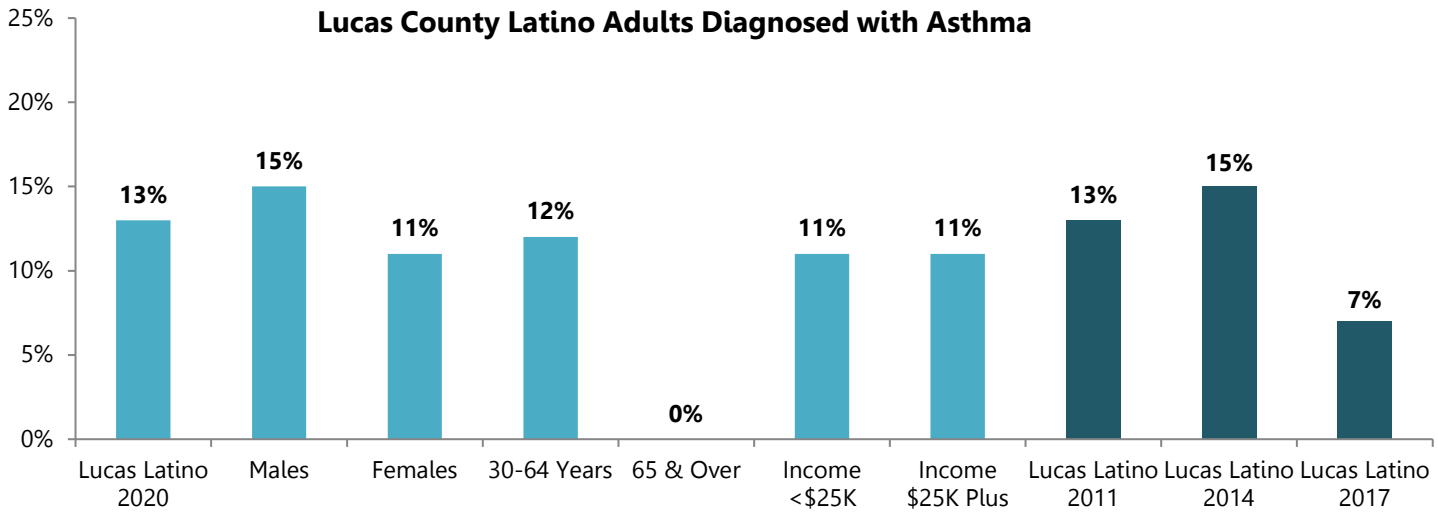
In 2020, 7% of Lucas County Latino adults were diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 16% (54) of all (328) Lucas County Latino resident deaths.

LATINO ARTHRITIS

Eleven percent (11%) of Lucas County Latino adults were diagnosed with some form of arthritis.

LATINO ASTHMA

In 2020, 13% of Lucas County Latino adults were diagnosed with asthma.



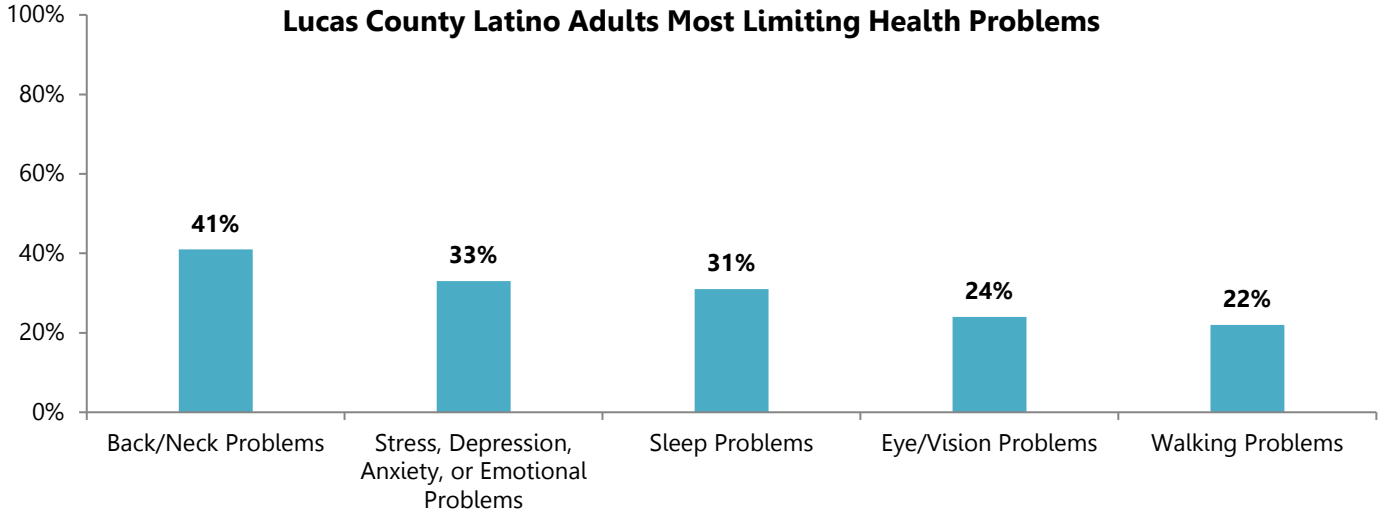
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

LATINO DIABETES

In 2020, 13% of Lucas County Latino adults were diagnosed with diabetes at some point in their lifetime. Forty-one percent (41%) of Latino adults with diabetes rated their health as fair or poor.

LATINO QUALITY OF LIFE

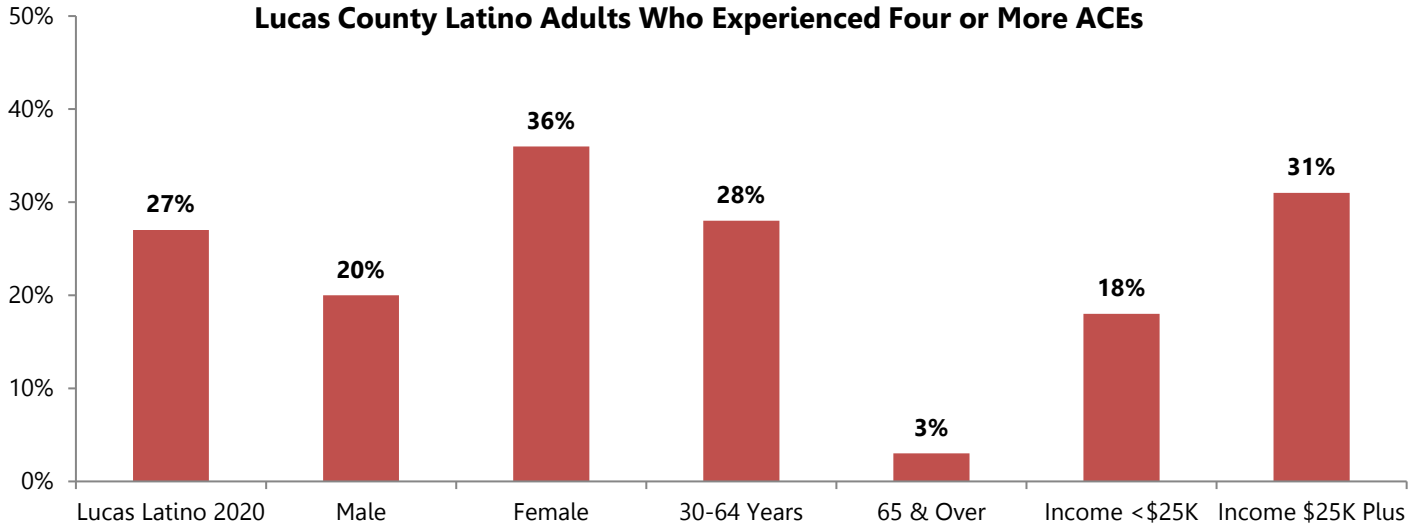
In 2020, 35% of Lucas County Latino adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (41%); stress, depression, anxiety or emotional problems (33%); sleep problems (31%); eye/vision problems (24%); and walking problems (22%).



Latino Data Summary | Social Conditions

LATINO SOCIAL DETERMINANTS OF HEALTH

In 2020, 5% of Lucas County Latino adults had to choose between paying bills and buying food. Twenty-seven percent (27%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime (ACEs are stressful or traumatic events, for example, parents becoming separated or divorced, or living with someone who was a problem drinker or alcoholic).



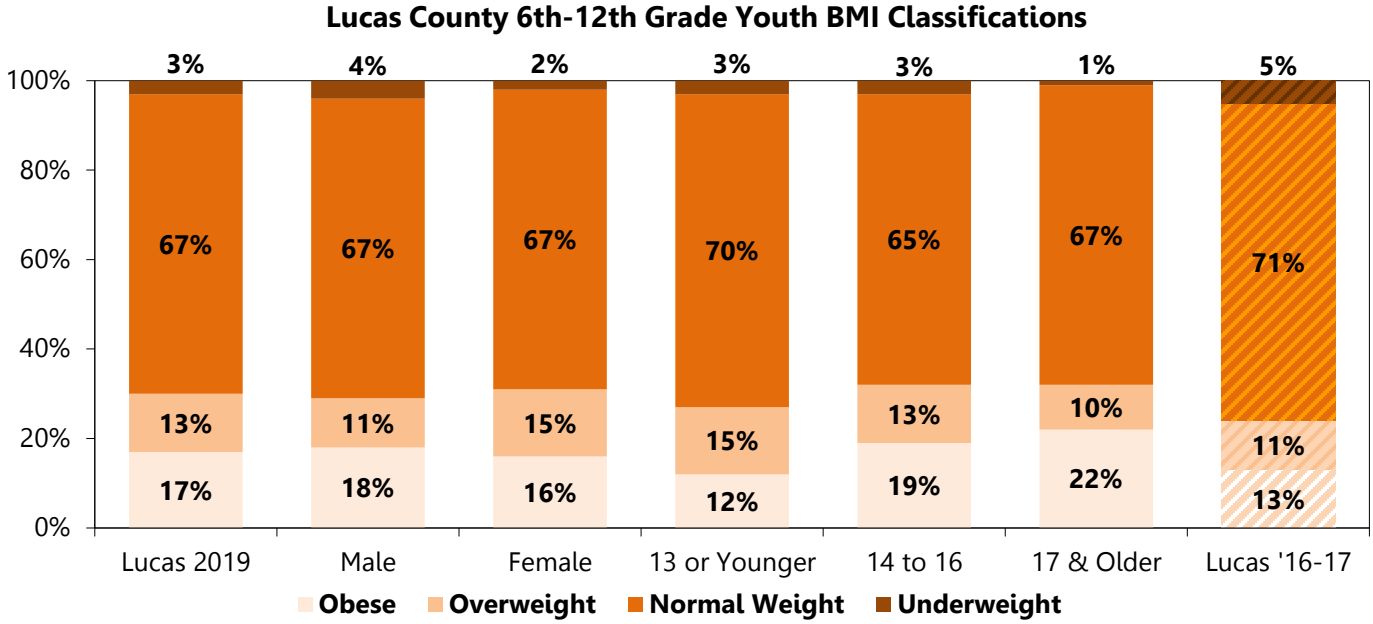
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

LATINO ENVIRONMENTAL HEALTH

Lucas County Latino adults reported the following as the top four issues that threatened their health in the past year: bed bugs (10%), mold (8%), air quality (6%), and plumbing problems (5%). Ten percent (10%) of Latino adults reported they had a disaster plan in preparation of a disaster.

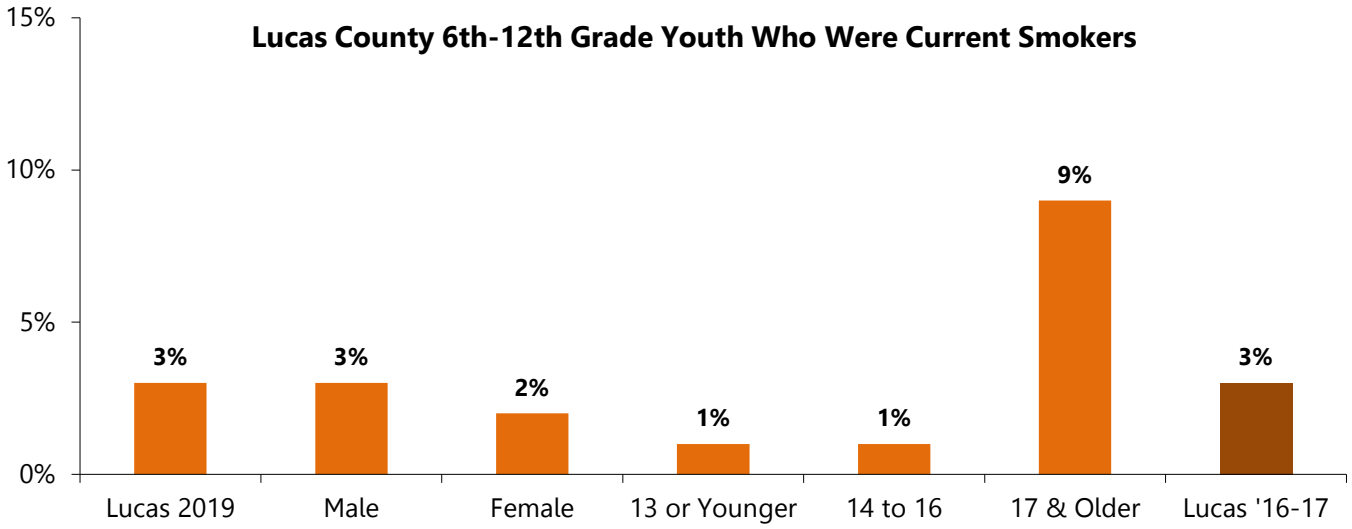
YOUTH WEIGHT STATUS

Nearly one-fifth (17%) of Lucas County youth were obese, according to body mass index (BMI) by age. When asked how they would describe their weight, 29% of Lucas County youth reported that they were slightly or very overweight. Eighteen percent (18%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week. Twelve percent (12%) of youth reported they went to bed hungry at least one day per week because their family did not have enough money for food.



YOUTH TOBACCO USE

Three percent (3%) of Lucas County youth were current smokers (having smoked at some time in the past month). Twelve percent (12%) of youth used e-cigarettes/vapes in the past year. Of youth who had used e-cigarettes/vapes in the past year, 56% put e-liquid or e-juice with nicotine in them.

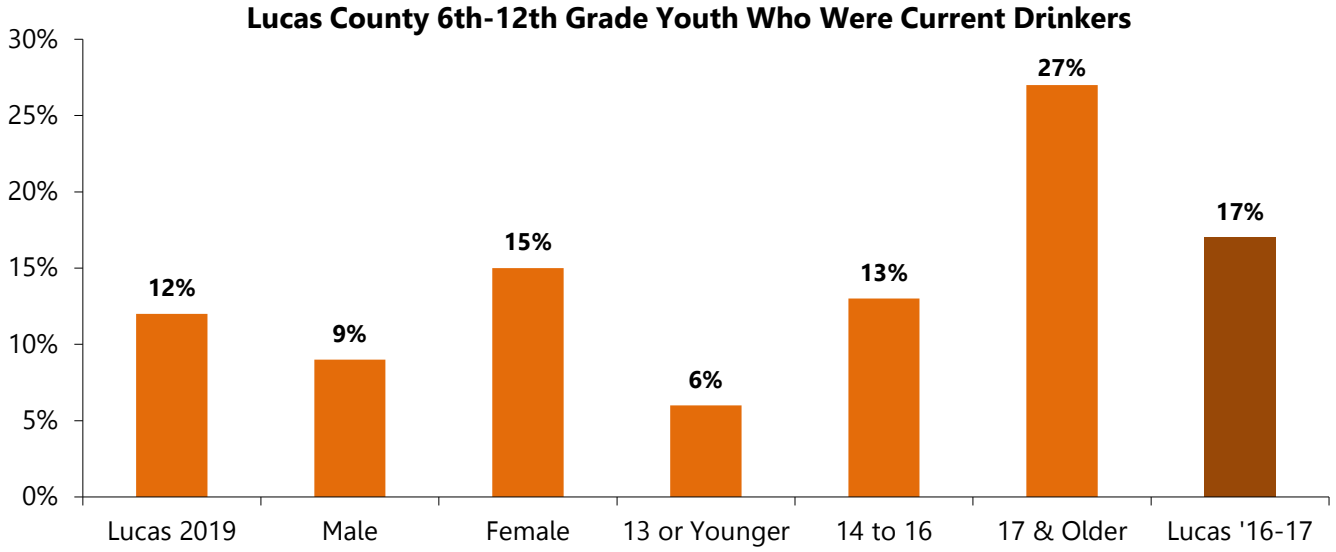


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

YOUTH ALCOHOL CONSUMPTION

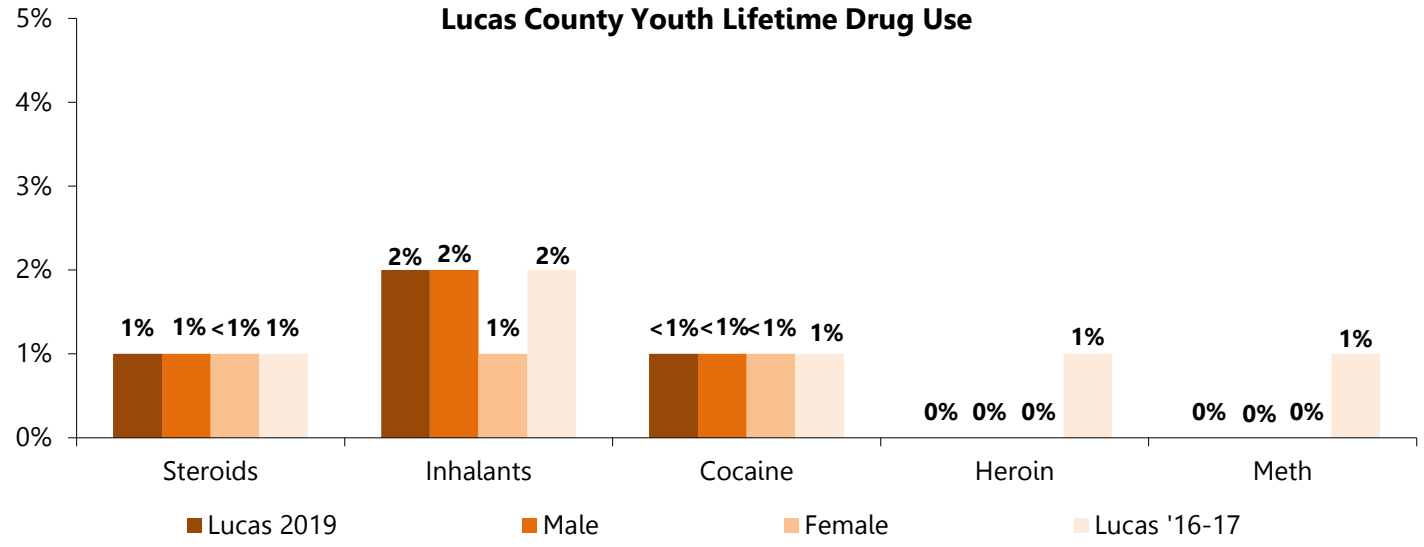
In 2019, 12% of Lucas County youth had at least one drink in the past month, defining them as a current drinker. Of Lucas County youth who drank, 57% were defined as binge drinkers. Fourteen percent (14%) of all Lucas County youth had ridden in a car driven by someone who had been drinking alcohol in the past month.

.



YOUTH DRUG USE

Twelve percent (12%) of Lucas County youth had used marijuana at least once in the past month. Twelve percent (12%) of youth used Ritalin, Adderall, Concerta, or other ADHD medications not prescribed for them or took more than was prescribed to feel good or get high at some time in their lifetime.



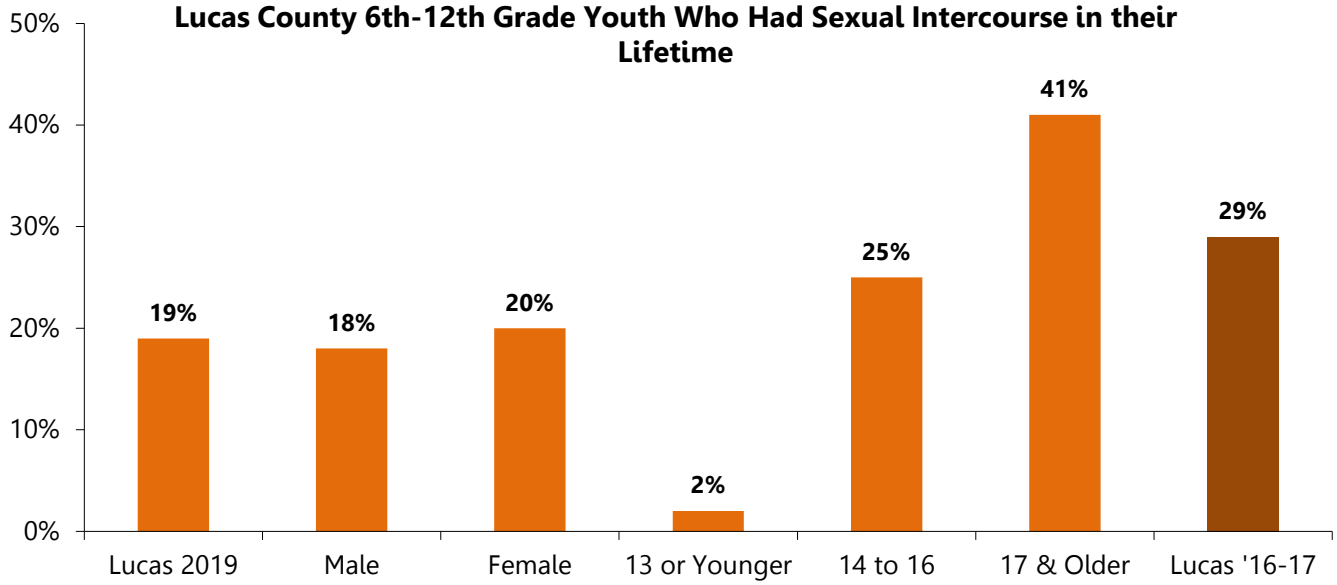
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

YOUTH PERCEPTIONS OF SUBSTANCE USE

In 2019, 74% of Lucas County youth thought there was a great risk in harming themselves if they used prescription drugs not prescribed to them. Seventy-eight percent (78%) of youth reported their parents would disapprove of them smoking cigarettes.

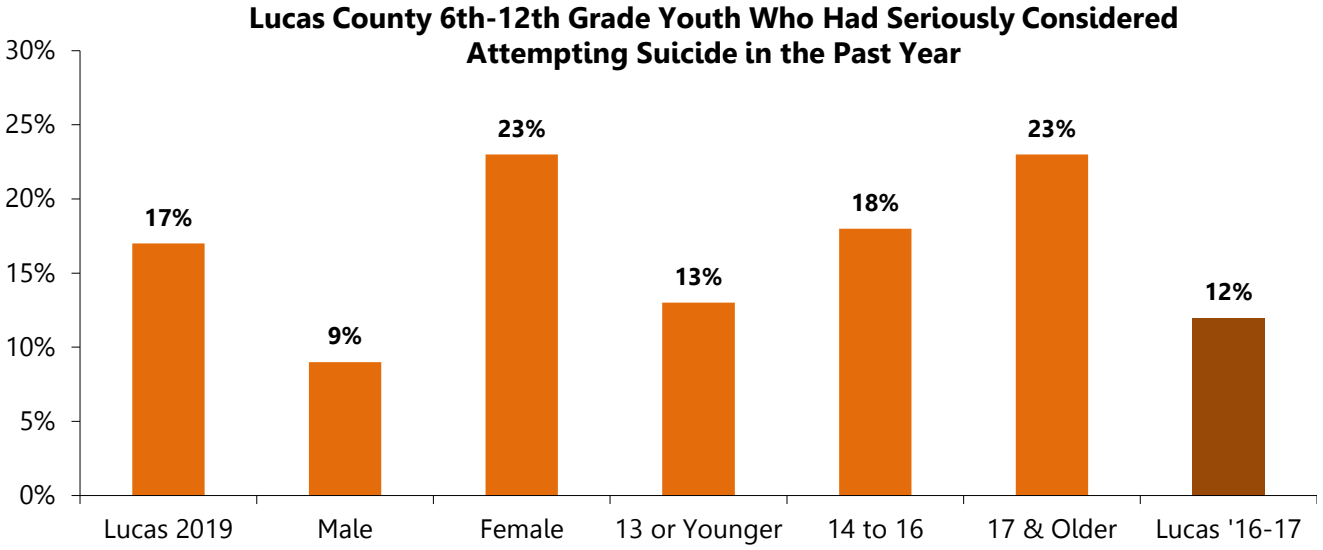
YOUTH SEXUAL BEHAVIOR

Nineteen (19%) of Lucas County youth had sexual intercourse in their lifetime. Eighteen percent (18%) of sexually active youth had four or more sexual partners in their lifetime. Six percent (6%) of youth engaged in intercourse without a reliable method of protection, and 30% reported they were unsure if they used a reliable method.



YOUTH MENTAL HEALTH

Seventeen percent (17%) of youth had seriously considered attempting suicide in the past year, and 10% attempted suicide in the past year. Over two-fifths (41%) of Lucas County youth reported academic success caused them anxiety, stress, or depression. One-fourth (25%) of youth had experienced three or more adverse childhood experiences (ACEs) in their lifetime (ACEs are stressful or traumatic events, for example, parents becoming separated or divorced, or living with someone who was a problem drinker or alcoholic).



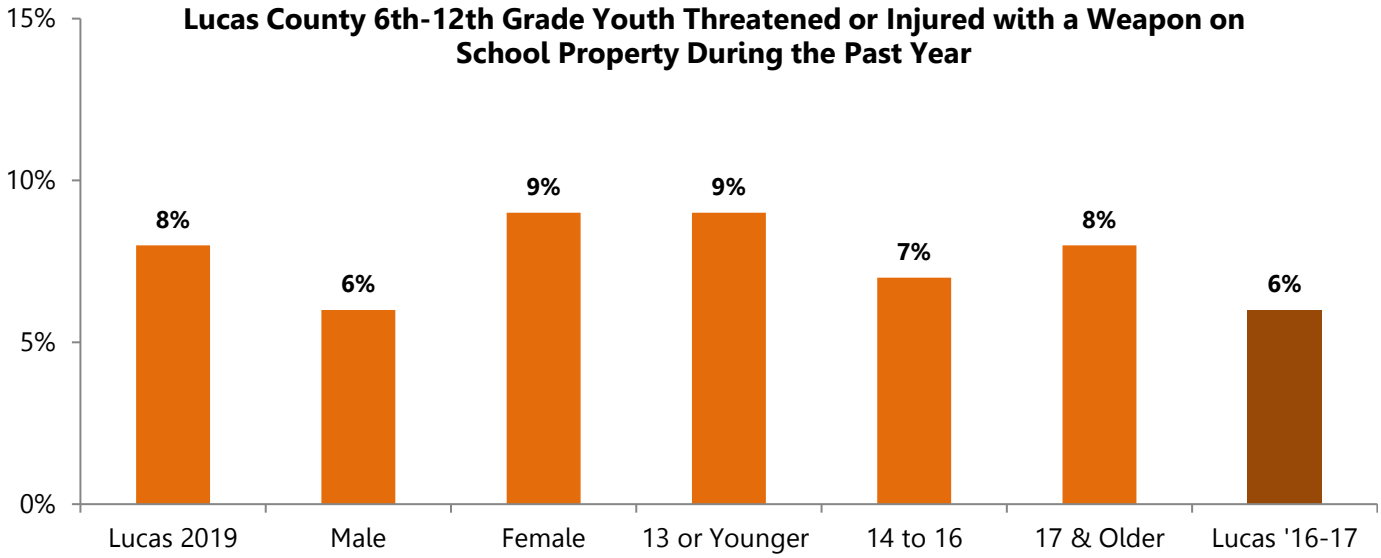
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

YOUTH SOCIAL DETERMINANTS OF HEALTH

Seventy percent (70%) of Lucas County youth had been to the dentist in the past year. Twelve percent (12%) of youth drivers had texted while driving in the past month. Forty-five percent (45%) of youth who had a social media or online gaming account believed that sharing information online is dangerous.

YOUTH VIOLENCE

Two percent (2%) of Lucas County youth carried a weapon (such as a gun, knife or club) on school property in the past month. Thirty percent (30%) of youth were involved in a physical fight in the past year. One-third (33%) of youth were bullied in the past year.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Child Health

HEALTH AND FUNCTIONAL STATUS

In 2020, 16% of children were classified as obese by body mass index (BMI) calculations. More than four-fifths (82%) of Lucas County parents had taken their child to the dentist in the past year. Ten percent (10%) of Lucas County parents reported their child had been diagnosed with asthma. Fourteen percent (14%) of parents reported their child had been diagnosed with ADD/ADHD.

HEALTH CARE ACCESS

In 2020, 1% of Lucas County parents reported their child did not currently have health insurance. Thirteen percent (13%) of parents reported their child did not get all of the prescription medications they needed in the past year. Ninety-six percent (96%) of parents had taken their child to the doctor for preventive care in the past year.

EARLY CHILDHOOD (0-to-5-YEARS-OLD)

The following information was reported by parents of 0-5 year olds. Ninety-four percent (94%) of mothers got prenatal care within the first three months during their last pregnancy. Sixteen percent (16%) of mothers received WIC services during their last pregnancy. Ninety percent (90%) of parents put their child to sleep on his/her back. Sixteen percent (16%) of mothers never breastfed their child.

MIDDLE CHILDHOOD (6-to-11-YEARS-OLD)

The following information was reported by Lucas County parents of 6-11 year olds. Ninety-two percent (92%) of parents reported their child participated in extracurricular activities. More than three-fourths (77%) of parents reported their child was physically active for at least 60 minutes on three or more days per week.

FAMILY AND COMMUNITY CHARACTERISTICS

Five percent (5%) of parents reported someone in their household went to bed hungry at least one day per week because they did not have enough money for food. Sixty-five percent (65%) of parents reported their neighborhood was always safe for their child to go out and play. Seven percent (7%) of parents reported their child experienced two or more adverse childhood experiences (ACEs) in their lifetime (ACEs are stressful or traumatic events, for example, parents becoming separated or divorced, or living with someone who was a problem drinker or alcoholic).

PARENT HEALTH

In 2020, 61% of parents rated their health as excellent or very good, decreasing to 33% of parents with annual incomes less than $25,000. In the past year, 56% of parents missed work due to their child's illnesses or injuries.

ADULT TREND SUMMARY

Adult Variables	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Health Status and Coverage							
Rated health as excellent or very good	51%	48%	45%	49%	45%	48%	51%
Rated general health as fair or poor	14%	18%	18%	14%	17%	19%	18%
Rated mental health as not good on four or more days (in the past month)	26%	25%	26%	37%	34%	N/A	N/A
Rated physical health as not good on four or more days (in the past month)	N/A	N/A	22%	24%	25%	N/A	N/A
Average number of days that mental health was not good (in the past month) (County Health Rankings)	N/A	N/A	4.3	6.0	5.5	4.6‡	4.0‡
Average number of days that physical health not good (in the past month) (County Health Rankings)	N/A	N/A	4.0	4.8	4.2	3.9‡	3.8‡
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	N/A	N/A	N/A	35%	35%	N/A	N/A
Uninsured	12%	13%	14%	6%	8%	9%	11%
Arthritis, Asthma, & Diabetes							
Had been diagnosed with diabetes	12%	13%	15%	12%	13%	12%	11%
Had been diagnosed with arthritis	27%	19%	19%	23%	18%	31%	26%
Had been diagnosed with asthma	12%	13%	13%	10%	13%	11%	10%
Cardiovascular Health							
Had angina	7%	3%	5%	2%	4%	5%	4%
Had a heart attack	N/A	3%	5%	5%	4%	5%	4%
Had a stroke	N/A	2%	3%	3%	3%	4%	3%
Had been diagnosed with high blood pressure	35%	34%	37%	34%	39%	35%	32%
Had been diagnosed with high blood cholesterol	34%	27%	25%	25%	27%	33%	33%
Had their blood cholesterol checked within the last five years	72%	76%	80%	77%	81%	85%	87%
Weight Status							
Overweight (BMI of 25.0 – 29.9)	37%	36%	34%	38%	34%	35%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	33%	35%	36%	36%	38%	35%	32%
Alcohol Consumption							
Current drinker (had at least one drink of alcohol within the past month)	57%	57%	54%	65%	60%	53%	54%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	18%	23%	21%	24%	22%	18%	17%
Drove after having perhaps too much alcohol to drink (in the past month)	N/A	N/A	N/A	8%	12%	4%*	3%*
Tobacco Use							
Current smoker (smoked on some or all days)	23%	24%	19%	14%	15%	21%	16%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	25%	23%	25%	23%	25%	24%	25%
Tried to quit smoking in the past year	85%	75%	74%	50%	56%	N/A	N/A
Used chewing tobacco or snuff in the past year	N/A	N/A	3%	3%	2%	N/A	N/A

N/A - Not Available
**2018 BRFSS Data*
‡2017 BRFSS as compiled by 2020 County Health Rankings
Indicates alignment with the Ohio State Health Assessment

Adult Variables	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Drug Use							
Adults who used marijuana in the past six months	9%	11%	10%	12%	7%	N/A	N/A
Adults who misused prescription drugs in the past six months	6%	8%	10%	6%	8%	N/A	N/A
Adults who used heroin in the past six months	<1%	1%	<1%	<1%	<1%	N/A	N/A
Sexual Behavior							
Had more than one sexual partner in past year	10%	9%	8%	12%	7%	N/A	N/A
Preventive Medicine							
Had a flu vaccine in the past year	31%	37%	53%	52%	57%	N/A	N/A
Had a flu vaccine in the past year (ages 65 and older)	N/A	62%	74%	73%	77%	63%	64%
Ever had a pneumonia vaccine in lifetime (ages 65 and older)	59%	61%	56%	71%	73%	75%	73%
Ever had a shingles or zoster vaccine	N/A	N/A	8%	18%	20%	29%	29%*
Had a clinical breast exam in the past two years (ages 40 and older)	N/A	N/A	72%	70%	71%	N/A	N/A
Had a mammogram within the past two years (ages 40 and older)	73%	74%	73%	75%	76%	74%*	72%*
Had a Pap smear in the past three years (ages 21-65)	77%ǂ	72%ǂ	73%ǂ	68%ǂ	77%	79%*	80%*
Had a digital rectal exam within the past year	30%	26%	22%	18%	17%	N/A	N/A
Quality of Life							
Limited in some way because of physical, mental or emotional problem	42%	N/A	47%	43%	37%	21%**	20%**
Mental Health							
Considered attempting suicide in the past year	3%	3%	3%	2%	5%	N/A	N/A
Oral Health							
Visited a dentist or a dental clinic (within the past year)	66%	68%	66%	66%	64%	67%*	68%*

N/A - Not Available
**2018 BRFSS Data*
***2015 BRFSS Data*
ǂ Includes all women regardless of age

MINORITY ADULT TREND SUMMARY

In addition to the general survey mailing, the Healthy Lucas County Executive Committee determined it would be beneficial to create individual trend summary tables for the African American and Latino populations. Additionally, sections were created for both adult populations to identity disparities among the African American and Latino communities. Please reference the table of contents to view individual section placement within the report. The child data did not include enough African American or Latino responses to break the data down into a child-specific minority trend summary table.

Adult Variables	Lucas County Whites 2020	Lucas County Latinos 2020	Lucas County African Americans 2020	Lucas County 2020	Ohio 2019	U.S. 2019
Health Status and Coverage						
Rated health as excellent or very good	50%	45%	36%	45%	48%	51%
Rated general health as fair or poor	13%	15%	25%	17%	19%	18%
Rated mental health as not good on four or more days (in the past month)	36%	33%	43%	34%	N/A	N/A
Rated physical health as not good on four or more days (in the past month)	23%	23%	30%	25%	N/A	N/A
Average number of days that mental health was not good (in the past month) (County Health Rankings)	5.4	4.9	6.1	5.5	4.6‡	4.0‡
Average number of days that physical health not good (in the past month) (County Health Rankings)	3.7	3.5	4.9	4.2	3.9‡	3.8‡
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	36%	27%	34%	35%	N/A	N/A
Uninsured	5%	10%	11%	8%	9%	11%
Arthritis, Asthma, & Diabetes						
Had been diagnosed with diabetes	11%	13%	15%	13%	12%	11%
Had been diagnosed with arthritis	17%	11%	23%	18%	31%	26%
Had been diagnosed with asthma	11%	13%	19%	13%	11%	10%
Cardiovascular Health						
Had angina	3%	2%	5%	4%	5%	4%
Had a heart attack	3%	6%	5%	4%	5%	4%
Had a stroke	2%	5%	4%	3%	4%	3%
Had been diagnosed with high blood pressure	34%	32%	55%	39%	35%	32%
Had been diagnosed with high blood cholesterol	27%	21%	31%	27%	33%	33%
Had blood cholesterol checked within the past five years	79%	82%	84%	81%	85%	87%
Weight Status						
Overweight (BMI of 25.0 – 29.9)	34%	29%	34%	34%	35%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	32%	51%	45%	38%	35%	32%

N/A - Not Available
**2018 BRFSS Data*
‡2017 BRFSS as compiled by 2020 County Health Rankings
Indicates alignment with the Ohio State Health Assessment

Adult Variables	Lucas County Whites 2020	Lucas County Latinos 2020	Lucas County African Americans 2020	Lucas County 2020	Ohio 2019	U.S. 2019
Alcohol Consumption						
Current drinker (had at least one drink of alcohol within the past month)	66%	53%	46%	60%	53%	54%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	26%	37%	20%	22%	18%	17%
Drove after having perhaps too much alcohol to drink (in the past month)	11%	12%	5%	12%	4%*	3%*
Tobacco Use						
Current smoker (smoked on some or all days)	16%	14%	21%	15%	21%	16%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	26%	30%	18%	25%	24%	25%
Tried to quit smoking in the past year	53%	42%	63%	56%	N/A	N/A
Used chewing tobacco or snuff in the past year	2%	1%	3%	2%	N/A	N/A
Drug Use						
Adults who used marijuana in the past six months	11%	7%	11%	7%	N/A	N/A
Adults who misused prescription drugs in the past six months	7%	6%	9%	8%	N/A	N/A
Adults who used heroin in the past six months	1%	0%	1%	<1%	N/A	N/A
Sexual Behavior						
Had more than one sexual partner in past year	6%	10%	6%	7%	N/A	N/A
Preventive Medicine						
Had a flu vaccine in the past year	56%	65%	55%	57%	N/A	N/A
Had a flu vaccine in the past year (ages 65 and older)	77%	87%	76%	77%	63%	64%
Ever had a pneumonia vaccine in lifetime (ages 65 and older)	77%	70%	70%	73%	75%	73%
Ever had a shingles or zoster vaccine	21%	16%	23%	20%	29%	29%*
Had a clinical breast exam in the past two years (ages 40 and older)	70%	87%	68%	71%	N/A	N/A
Had a mammogram within the past two years (ages 40 and older)	73%	94%	76%	76%	74%*	72%*
Had a Pap smear in the past three years (ages 21-65)	78%	89%	77%	77%	79%*	80%*
Had a digital rectal exam within the past year	18%	5%	22%	17%	N/A	N/A
Quality of Life						
Limited in some way because of physical, mental or emotional problem	32%	35%	45%	37%	21%**	20%**
Mental Health						
Considered attempting suicide in the past year	5%	4%	9%	5%	N/A	N/A
Oral Health						
Visited a dentist or a dental clinic (within the past year)	71%	58%	44%	64%	67%*	68%*

N/A - Not Available
**2018 BRFSS Data*
***2015 BRFSS Data*
Indicates alignment with the Ohio State Health Assessment

LATINO ADULT TREND SUMMARY

Adult Variables	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Lucas County 2020	Ohio Latinos 2018	U.S. Latinos 2018
Health Status and Coverage								
Rated health as excellent or very good	55%	38%	39%	29%	45%	45%	57%	38%
Rated general health as fair or poor	15%	20%	17%	25%	15%	17%	12%	26%
Rated their mental health as not good on four or more days in the previous month	23%	33%	38%	34%	33%	34%	N/A	23%
Rated physical health as not good on four or more days (in the past month)	19%	32%	20%	34%	23%	25%	8%	23%
Average number of days that mental health was not good (in the past month) (County Health Rankings)	N/A	N/A	N/A	6.5	4.9	5.5	N/A	N/A
Average number of days that physical health not good (in the past month) (County Health Rankings)	N/A	N/A	N/A	7.5	3.5	4.2	N/A	N/A
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	N/A	N/A	N/A	41%	27%	35%	33%	23%
Uninsured	13%	17%	19%	10%	10%	8%	18%	28%
Arthritis, Asthma, & Diabetes								
Had been diagnosed with diabetes	11%	17%	21%	16%	13%	13%	10%	12%
Had been diagnosed with arthritis	18%	15%	13%	20%	11%	18%	34%	16%
Had been diagnosed with asthma	13%	13%	15%	7%	13%	13%	24%	13%
Cardiovascular Health								
Had angina	4%	2%	5%	3%	2%	4%	N/A	3%
Had a heart attack	N/A	3%	4%	3%	6%	4%	N/A	4%
Had a stroke	N/A	4%	2%	6%	5%	3%	N/A	2%
Had been diagnosed with high blood pressure	21%	33%	28%	33%	32%	39%	N/A	N/A
Had been diagnosed with high blood cholesterol	29%	25%	17%	17%	21%	27%	N/A	N/A
Had blood cholesterol checked within the past 5 years	64%	68%	73%	69%	82%	81%	N/A	N/A
Weight Status								
Overweight (BMI of 25.0 – 29.9)	35%	37%	30%	38%	29%	34%	20%	38%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	33%	42%	49%	42%	51%	38%	38%	34%
Alcohol Consumption								
Current drinker (had at least one drink of alcohol within the past month)	47%	57%	51%	57%	53%	60%	48%	46%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	N/A	29%	25%	41%	37%	22%	17%	18%
Drove after having perhaps too much alcohol to drink (in the past month)	N/A	N/A	N/A	6%	12%	12%	N/A	N/A

N/A - Not Available

Indicates alignment with Ohio State Health Assessment

Adult Variables	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Lucas County 2020	Ohio Latinos 2018	U.S. Latinos 2018
Tobacco Use								
Current smoker (smoked on some or all days)	26%	25%	11%	26%	14%	15%	29%	12%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	18%	17%	22%	19%	30%	25%	18%	18%
Tried to quit smoking in the past year	N/A	N/A	N/A	41%	42%	56%	N/A	N/A
Used chewing tobacco or snuff in the past year	N/A	N/A	N/A	1%	1%	2%	N/A	N/A
Drug Use								
Adults who used marijuana in the past six months	10%	10%	11%	9%	7%	7%	N/A	N/A
Adults who misused prescription drugs in the past six months	4%	7%	11%	6%	6%	8%	N/A	N/A
Adults who used heroin in the past six months	0%	0%	0%	0%	0%	<1%	N/A	N/A
Sexual Behavior								
Had more than one sexual partner in the past year	7%	10%	9%	14%	10%	7%	N/A	N/A
Preventive Medicine								
Had a flu vaccine in the past year	31%	37%	52%	40%	65%	57%	33%	25%
Had a flu vaccine in the past year (ages 65 and older)	75%	64%	82%	84%	87%	77%	N/A	50%
Had a pneumonia vaccine (age 65 and older)	53%	52%	67%	70%	70%	73%	N/A	56%
Ever had a shingles or zoster vaccine	N/A	N/A	7%	7%	16%	20%	N/A	N/A
Had a clinical breast exam in the past two years (ages 40 and older)	77%	64%	70%	69%	87%	71%	N/A	N/A
Had a mammogram within the past two years (ages 40 and older)	67%	74%	80%	64%	94%	76%	72%	72%
Had a Pap smear in the past three years (ages 21-65)	N/A	N/A	61%*	69%*	89%	77%	61%	80%
Had a digital rectal exam within the past year	21%	17%	15%	14%	5%	17%	N/A	N/A
Quality of Life								
Limited in some way because of physical, mental or emotional problem	41%	N/A	46%	40%	35%	37%	N/A	N/A
Mental Health								
Considered attempting suicide in the past year	N/A	7%	8%	7%	4%	5%	N/A	N/A
Oral Health								
Visited a dentist or a dental clinic (within the past year)	68%	56%	61%	39%	58%	64%	65%	59%

N/A - Not Available

**Includes all women regardless of age*

Indicates alignment with the Ohio State Health Assessment

AFRICAN AMERICAN ADULT TREND SUMMARY

Adult Variables	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Lucas County 2020	Ohio African Americans 2018	U.S. African Americans 2018
Health Status and Coverage								
Rated health as excellent or very good	37%	36%	29%	44%	36%	45%	43%	44%
Rated general health as fair or poor	25%	26%	29%	20%	25%	17%	23%	21%
Rated their mental health as not good on four or more days in the previous month	30%	29%	32%	33%	43%	34%	29%	26%
Rated physical health as not good on four or more days (in the past month)	31%	34%	22%	26%	30%	25%	24%	23%
Average number of days that mental health was not good (in the past month) (County Health Rankings)	N/A	N/A	N/A	6.0	6.1	5.5	N/A	N/A
Average number of days that physical health not good (in the past month) (County Health Rankings)	N/A	N/A	N/A	6.5	4.9	4.2	N/A	N/A
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	N/A	N/A	N/A	38%	34%	35%	24%	25%
Uninsured	12%	25%	25%	3%	11%	8%	10%	14%
Arthritis, Asthma, & Diabetes								
Had been diagnosed with diabetes	22%	17%	21%	22%	15%	13%	13%	15%
Had been diagnosed with arthritis	31%	22%	18%	22%	23%	18%	28%	25%
Had been diagnosed with asthma	15%	14%	15%	14%	19%	13%	16%	18%
Cardiovascular Health								
Had angina	10%	1%	5%	2%	5%	4%	3%	4%
Had a heart attack	N/A	1%	8%	4%	5%	4%	5%	4%
Had a stroke	N/A	2%	4%	6%	4%	3%	6%	5%
Had been diagnosed with high blood pressure	54%	44%	49%	44%	55%	39%	40%*	N/A
Had been diagnosed with high blood cholesterol	37%	21%	23%	24%	31%	27%	28%*	N/A
Had blood cholesterol checked within the past 5 years	75%	69%	79%	68%	84%	81%	88%*	N/A

**2017 BRFSS Data*

Indicates alignment with the Ohio State Health Assessment

Adult Variables	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Lucas County 2020	Ohio African Americans 2018	U.S. African Americans 2018
Weight Status								
Overweight (BMI of 25.0 – 29.9)	37%	28%	35%	27%	34%	34%	34%	33%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	44%	47%	39%	58%	45%	38%	36%	40%
Alcohol Consumption								
Current drinker (had at least one drink of alcohol within the past month)	40%	43%	46%	42%	46%	60%	49%	47%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	N/A	21%	21%	32%	20%	22%	18%	13%
Drove after having perhaps too much alcohol to drink (in the past month)	N/A	N/A	N/A	7%	5%	12%	N/A	N/A
Drug Use								
Adults who used marijuana in the past six months	9%	17%	20%	7%	11%	7%	N/A	N/A
Adults who misused prescription drugs in the past six months	10%	8%	11%	11%	9%	8%	N/A	N/A
Adults who used heroin in the past six months	<1%	0%	1%	1%	1%	<1%	N/A	N/A
Tobacco Use								
Current smoker (smoked on some or all days)	26%	25%	33%	17%	21%	15%	24%	17%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	20%	17%	15%	18%	18%	25%	18%	15%
Tried to quit smoking in the past year	N/A	N/A	N/A	67%	63%	56%	63%	69%
Used chewing tobacco or snuff in the past year	N/A	N/A	N/A	1%	3%	2%	N/A	N/A
Sexual Behavior								
Had more than one sexual partner in past year	20%	20%	17%	26%	6%	7%	N/A	N/A

N/A - Not Available

Indicates alignment with the Ohio State Health Assessment

Adult Variables	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Lucas County 2020	Ohio African Americans 2018	U.S. African Americans 2018
Preventive Medicine								
Had a flu vaccine in the past year	28%	28%	40%	59%	55%	57%	31%	28%
Had a flu vaccine in the past year (ages 65 and older)	46%	67%	55%	73%	76%	77%	52%	47%
Had a pneumonia vaccination (ages 65 and over)	44%	55%	51%	71%	70%	73%	69%	60%
Ever had a shingles or zoster vaccine	N/A	N/A	N/A	12%	23%	20%	N/A	N/A
Had a clinical breast exam in the past two years (ages 40 and older)	78%	79%	74%	81%	68%	71%	83%	N/A
Had a mammogram within the past two years (ages 40 and older)	78%	76%	79%	80%	76%	76%	81%	78%
Had a Pap smear in the past three years (ages 21-65)	N/A	N/A	78%*	77%*	77%	77%	N/A	85%
Had a digital rectal exam within the past year	37%	34%	21%	7%	22%	17%	N/A	N/A
Quality of Life								
Limited in some way because of physical, mental or emotional problem	53%	N/A	49%	56%	45%	37%	N/A	N/A
Mental Health								
Considered attempting suicide in the past year	N/A	3%	5%	2%	9%	5%	N/A	N/A
Oral Health								
Visited a dentist or a dental clinic (within the past year)	55%	60%	51%	63%	44%	64%	64%	61%

N/A - Not Available
**Includes all women regardless of age*

YOUTH TREND SUMMARY

Youth Variables	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Weight Control							
Obese	17%	15%	13%	15%	19%	17%	16%
Overweight	13%	11%	11%	12%	12%	12%	16%
Described themselves as slightly or very overweight	29%	25%	25%	30%	33%	N/A	32%
Exercised to lose weight	36%	43%	48%	42%	36%	N/A	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight	26%	28%	31%	26%	30%	N/A	N/A
Went without eating for 24 hours or more	6%	7%	6%	4%	6%	N/A	N/A
Took diet pills, powders, or liquids without a doctor's advice	2%	3%	2%	1%	2%	N/A	N/A
Vomited or took laxatives	2%	3%	3%	1%	3%	N/A	N/A
Ate one to four servings of fruits and vegetables per day	67%	82%	81%	87%	70%	N/A	N/A
Physically active at least 60 minutes per day on every day in past week	21%	28%	28%	23%	20%	23%	23%
Physically active at least 60 minutes per day on five or more days in past week	40%	43%	50%	44%	40%	43%	44%
Did not participate in at least 60 minutes of physical activity on any day in the past week	18%	15%	15%	14%	18%	21%	17%
Watched three or more hours per day of television (on an average school day)	20%	40%	34%	18%	18%	N/A	20%
Unintentional Injuries and Violence							
Were in a physical fight (in past year)	30%	28%	25%	23%	26%	19%	22%
Carried a weapon on school property (in the past month)	2%	N/A	9%	N/A	2%	N/A	3%
Threatened or injured with a weapon on school property (in past year)	8%	N/A	7%	7%	8%	N/A	7%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	11%	6%	6%	4%	17%	N/A	9%
Electronically bullied (in past year)	9%	15%	12%	12%	11%	13%	16%
Bullied (in past year)	33%	43%	38%	35%	33%	N/A	N/A
Bullied on school property (in past year)	20%	N/A	22%	17%	17%	14%	20%
Ever purposefully hurt themselves	35%	23%	10%	N/A	31%	N/A	N/A
Mental Health							
Seriously considered attempting suicide (in the past year)	17%	16%	18%	14%	19%	16%	19%
Attempted suicide (in past year)	10%	4%	8%	8%	11%	7%	9%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past 12 months)	38%	24%	29%	29%	45%	33%	37%

N/A – Not Available

Indicates alignment with the Ohio State Health Assessment

Youth Variables	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Alcohol Consumption							
Current drinker (at least one drink of alcohol on at least one day during the past month)	12%	39%	28%	27%	19%	26%	29%
Binge drinker (drank five or more drinks within a couple of hours on at least one day during the past month)	7%	23%	21%	13%	12%	13%	14%
Obtained the alcohol they drank by someone giving it to them (of youth drinkers)	34%	21%	14%	N/A	31%	N/A	41%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on one or more occasion during the past month)	14%	25%	21%	19%	14%	N/A	17%
Drove when they had been drinking alcohol (of youth drivers on one or more occasion during the past month)	4%	9%	5%	6%	4%	N/A	5%
Drank for the first time before age 13 (of all youth)	12%	18%	12%	8%	8%	16%	15%
Tobacco Use							
Currently smoked cigarettes (on at least one day during the past month)	3%	18%	9%	5%	4%	5%	6%
Smoked a whole cigarette before the age of 13 (for the first time of all youth)	5%	6%	5%	4%	4%	N/A	7%**
Tried to quit smoking (of youth who smoked in the past year)	47%	46%*	40%*	34%*	31%	N/A	48%
Smoked cigarettes frequently (of current smokers on twenty or more days during the past month)	1%	N/A	N/A	2%	1%	1%	1%
Sexual Behavior							
Ever had sexual intercourse	19%	63%	53%	42%	32%	38%	38%
Participated in anal sex	3%	16%	6%	8%	5%	N/A	N/A
Participated in oral sex	17%	46%	44%	35%	30%	N/A	N/A
Participated in sexting	20%	40%	34%	37%	31%	N/A	N/A
Had viewed pornography	23%	N/A	37%	42%	31%	N/A	N/A
Used a condom (during last sexual intercourse)	31%	75%	68%	58%	24%	45%	54%
Used birth control pills (during last sexual intercourse)	10%	20%	26%	15%	9%	32%	23%
Used an IUD (during last sexual intercourse)	8%	8%	7%	1%	7%	5%	5%
Used a shot, patch or birth control ring (during last sexual intercourse)	5%	8%	7%	3%	5%	N/A	N/A
Did not use any method to prevent pregnancy during last sexual intercourse	6%	7%	10%	13%	5%	12%	12%
Had sexual intercourse with four or more persons (of all youth during their life)	4%	27%	21%	15%	8%	8%	9%
Had sexual intercourse before the age 13 (for the first time of all youth)	2%	12%	10%	7%	2%	3%	3%

N/A – Not Available

Indicates alignment with the Ohio State Health Assessment

**Tried to quit smoking only cigarettes*

Youth Variables	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Drug Use							
Currently used marijuana (in the past month)	12%	26%	19%	18%	16%	16%	22%
Ever used cocaine (in their lifetime)	<1%	4%	3%	2%	<1%	4%	4%
Ever used heroin (in their lifetime)	0%	2%	1%	1%	0%	2%	2%
Ever used methamphetamines (in their lifetime)	0%	3%	2%	1%	0%	N/A	2%
Ever took steroids without a doctor's prescription (in their lifetime)	1%	4%	4%	1%	1%	N/A	2%
Ever used inhalants (in their lifetime)	2%	9%	5%	3%	2%	8%	6%
Ever used ecstasy (also called MDMA in their lifetime)	1%	N/A	3%	2%	1%	N/A	4%
Social Determinants of Health							
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	70%	79%	77%	76%	68%	78%	76%
Diagnosed with asthma	21%	N/A	N/A	24%	24%	24%	22%

N/A – Not Available

MINORITY YOUTH TREND SUMMARY

Youth Variables	Lucas County White 2019 (6th-12th)	Lucas County African Americans 2019 (6th-12th)	Lucas County Latinos 2019 (6th-12th)	Lucas County 2019 (6th-12th)	Lucas County White 2019 (9th-12th)	Lucas County African Americans 2019 (9th-12th)	Lucas County Latinos 2019 (9th-12th)	Lucas County 2019 (9th-12th)
Weight Control								
Obese	17%	19%	19%	17%	20%	18%	21%	19%
Overweight	10%	14%	21%	13%	11%	13%	19%	12%
Described themselves as slightly or very overweight	30%	27%	39%	29%	37%	25%	40%	33%
Exercised to lose weight (in the past month)	38%	32%	31%	36%	37%	31%	34%	36%
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past month)	30%	19%	42%	26%	36%	21%	39%	30%
Went without eating for 24 hours or more (in the past month)	6%	6%	8%	6%	6%	7%	2%	6%
Took diet pills, powders, or liquids without a doctor's advice (in the past month)	1%	2%	3%	2%	1%	3%	2%	2%
Vomited or took laxatives (in the past month)	2%	3%	3%	2%	3%	2%	4%	3%
Ate one to four servings of fruits and vegetables per day	69%	63%	69%	67%	72%	67%	72%	87%
Physically active at least 60 minutes per day on every day in past week	24%	18%	21%	21%	19%	22%	14%	20%
Physically active at least 60 minutes per day on five or more days in past week	44%	36%	35%	40%	41%	39%	33%	40%
Did not participate in at least 60 minutes of physical activity on any day in the past week	17%	22%	17%	18%	15%	23%	18%	18%
Watched three or more hours per day of television (on an average school day)	16%	26%	25%	20%	16%	22%	19%	18%
Unintentional Injuries and Violence								
Were in a physical fight (in past year)	24%	36%	39%	30%	21%	33%	30%	26%
Carried a weapon on school property (in the past month)	1%	3%	1%	2%	1%	5%	0%	2%
Threatened or injured with a weapon on school property (in past year)	6%	8%	13%	8%	7%	8%	6%	8%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)*	10%	10%	15%	11%	13%	16%	23%	17%
Electronically bullied (in past year)	9%	6%	13%	9%	12%	7%	12%	11%
Bullied (in past year)	35%	29%	37%	33%	33%	32%	29%	33%
Bullied on school property (in past year)	23%	13%	24%	20%	20%	11%	19%	17%
Ever purposefully hurt themselves	31%	35%	37%	35%	30%	31%	46%	N/A

N/A - Not Available

Indicates alignment with the Ohio State Health Assessment

Youth Variables	Lucas County White 2019 (6th-12th)	Lucas County African Americans 2019 (6th-12th)	Lucas County Latinos 2019 (6th-12th)	Lucas County 2019 (6th-12th)	Lucas County White 2019 (9th-12th)	Lucas County African Americans 2019 (9th-12th)	Lucas County Latinos 2019 (9th-12th)	Lucas County 2019 (9th-12th)
Mental Health								
Seriously considered attempting suicide (in the past year)	13%	18%	27%	17%	17%	21%	21%	19%
Attempted suicide (in past year)	6%	9%	17%	10%	10%	10%	16%	11%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past 12 months)	33%	40%	46%	38%	43%	49%	38%	45%
Alcohol Consumption								
Current drinker (at least one drink of alcohol on at least one day during the past month)	12%	16%	11%	12%	21%	20%	15%	19%
Binge drinker (drank five or more drinks within a couple of hours on at least one day during the past month)	7%	8%	7%	7%	13%	11%	7%	12%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on one or more occasion during the past month)	14%	15%	15%	14%	13%	14%	17%	14%
Drove when they had been drinking alcohol (of youth drivers on one or more occasion during the past month)	2%	4%	10%	4%	3%	5%	9%	4%
Drank for the first time before age 13 (of all youth)	10%	12%	19%	12%	9%	9%	9%	8%
Tobacco Use								
Currently smoked cigarettes (on at least one day during the past month)	2%	2%	3%	3%	4%	2%	6%	4%
Smoked a whole cigarette before the age of 13 (for the first time of all youth)	3%	8%	6%	5%	3%	6%	5%	4%
Tried to quit smoking (of youth who smoked in the past year)	52%	31%	59%	47%	52%	31%	53%	31%

N/A - Not Available

Indicates alignment with the Ohio State Health Assessment

Youth Variables	Lucas County White 2019 (6th-12th)	Lucas County African Americans 2019 (6th-12th)	Lucas County Latinos 2019 (6th-12th)	Lucas County 2019 (6th-12th)	Lucas County White 2019 (9th-12th)	Lucas County African Americans 2019 (9th-12th)	Lucas County Latinos 2019 (9th-12th)	Lucas County 2019 (9th-12th)
Sexual Behavior								
Ever had sexual intercourse	19%	19%	21%	19%	38%	27%	34%	32%
Participated in anal sex	3%	1%	8%	3%	5%	2%	10%	5%
Participated in oral sex	18%	16%	23%	17%	33%	23%	40%	30%
Participated in sexting	21%	19%	22%	20%	35%	26%	37%	31%
Had viewed pornography	26%	18%	28%	23%	38%	20%	41%	31%
Used a condom (during last sexual intercourse)	32%	22%	16%	31%	37%	24%	56%	24%
Used birth control pills (during last sexual intercourse)	21%	5%	2%	10%	27%	6%	3%	9%
Used an IUD (during last sexual intercourse)	8%	7%	3%	8%	10%	9%	6%	7%
Used a shot, patch, or birth control ring (during last sexual intercourse)	5%	8%	0%	5%	7%	6%	0%	5%
Did not use any method to prevent pregnancy during last sexual intercourse	3%	7%	5%	6%	3%	9%	14%	5%
Had sexual intercourse with four or more persons (of all youth during their life)	4%	4%	5%	18%	8%	7%	10%	18%
Had sexual intercourse before the age 13 (for the first time of all youth)	0%	4%	5%	2%	0%	3%	4%	2%
Drug Use								
Currently used marijuana (in the past 30 days)	9%	12%	16%	12%	16%	15%	17%	16%
Ever used cocaine (in their lifetime)	1%	0%	1%	<1%	1%	0%	1%	<1%
Ever used heroin (in their lifetime)	0%	0%	0%	0%	0%	0%	0%	0%
Ever used methamphetamines (in their lifetime)	0%	0%	0%	0%	0%	0%	0%	0%
Ever took steroids without a doctor's prescription (in their lifetime)	1%	1%	1%	1%	1%	1%	2%	1%
Ever used inhalants (in their lifetime)	2%	1%	1%	2%	2%	1%	0%	2%
Ever used ecstasy (also called MDMA in their lifetime)	0%	2%	3%	1%	0%	2%	4%	1%
Social Determinants of Health								
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	80%	62%	65%	70%	80%	59%	61%	68%
Diagnosed with asthma	17%	27%	25%	21%	22%	28%	25%	24%

CHILD TREND SUMMARY

Child Comparisons	Lucas County 2014 Ages 0-5	Lucas County 2017 Ages 0-5	Lucas County 2020 Ages 0-5	Ohio 2017/ 2018 Ages 0-5	U.S. 2017/ 2018 Ages 0-5	Lucas County 2014 Ages 6-11	Lucas County 2017 Ages 6-11	Lucas County 2020 Ages 6-11	Ohio 2017/ 2018 Ages 6-11	U.S. 2017/ 2018 Ages 6-11
Health and Functional Status										
Rated health as excellent or very good	91%	98%	99%	92%	93%	86%	97%	95%	89%	90%
Dental care visit in past year	64%	61%	64%	52%**	62%**	91%	94%	92%	93%	92%
Diagnosed with asthma	11%	5%	4%	4%	6%	17%	15%	14%	13%	13%
Diagnosed with ADHD/ADD	1%	0%	1%	1%*	2%*	14%	12%	22%	14%	10%
Diagnosed with behavioral or conduct problems	3%	0%	4%	3%*	5%*	5%	9%	9%	13%	10%
Diagnosed with depression	1%	0%	4%	0%*	<1%*	2%	2%	6%	1%	2%
Diagnosed with epilepsy	0%	0%	0%	N/A	1%	2%	1%	1%	N/A	1%
Diagnosed with a head injury	1%	0%	0%	N/A	N/A	2%	1%	0%	N/A	N/A
Diagnosed with anxiety problems	2%	0%	3%	1%*	2%*	6%	10%	15%	9%	9%
Diagnosed with developmental delay	N/A	3%	0%	10%*	8%*	N/A	10%	0%	8%	8%
Diagnosed with learning disability	3%	0%	0%	1%*	2%*	5%	6%	8%	11%	9%
Diagnosed with speech or language disorder	15%	10%	10%	6%*	11%*	9%	11%	16%	10%	10%
Two or more health conditions	N/A	N/A	6%	5%	7%	N/A	N/A	22%	23%	21%
Health Care Access										
Had public insurance	28%	28%	17%	32%	33%	22%	26%	20%	25%	32%
Been to doctor for preventive care in past year	95%	96%	100%	92%¥	89%¥	88%	92%	93%	81%¥	80%¥
Received all the medical care they needed	93%	99%	94%	N/A	N/A	94%	96%	86%	N/A	N/A
Had a personal doctor or nurse	56%	88%	84%	72%	72%	58%	85%	84%	77%	72%
Family had problems paying for child's medical or health care bills (in past year)	N/A	N/A	15%	7%	9%	N/A	N/A	10%	10%	11%
Family and Community Characteristics										
Family ate a meal together every day of the week	50%	35%	51%	57%	54%	39%	35%	29%	44%	45%
Neighborhood is usually or always safe	89%	90%	95%	N/A	N/A	95%	91%	94%	N/A	N/A
Child experienced two or more ACEs	N/A	N/A	0%	13%	10%	N/A	N/A	10%	27%	20%
Parent or family member quit a job, did not take a job, or greatly changed job because of problems with childcare for child (in past year)	N/A	N/A	6%	10%	9%	N/A	N/A	5%	N/A	N/A
Primary language spoken at home was dialect other than English	N/A	N/A	1%	5%	16%	N/A	N/A	1%	5%	14%

N/A – Not Available
***Ages 1-5*
**Ages 3-5*
¥2016/17 NSCH data
Indicates alignment with the Ohio State Health Assessment

Child Comparisons	Lucas County 2014 Ages 0-5	Lucas County 2017 Ages 0-5	Lucas County 2020 Ages 0-5	Ohio 2017/ 2018 Ages 0-5	U.S. 2017/ 2018 Ages 0-5	Lucas County 2014 Ages 6-11	Lucas County 2017 Ages 6-11	Lucas County 2020 Ages 6-11	Ohio 2017/ 2018 Ages 6-11	U.S. 2017/ 2018 Ages 6-11
Early Childhood (0-5 Year Olds)										
Never breastfed their child	29%	22%	16%	20%	20%	N/A	N/A	N/A	N/A	N/A
Child put to bed on their back	68%	81%	90%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Middle Childhood (6-11 Year Olds)										
Child participated in one or more activities	N/A	N/A	N/A	N/A	N/A	N/A	N/A	92%	78%	78%
Parent Health										
Mother's mental or emotional health was fair/poor	4%	10%	7%	9%	5%	8%	9%	13%	9%	5%
Father's mental or emotional health was fair/poor	2%	6%	7%	7%	3%	1%	9%	6%	4%	3%
Mother's physical health status is fair/poor	2%	6%	3%	3%	4%	2%	6%	9%	7%	6%
Father's physical health status is fair/poor	2%	6%	11%	3%	5%	2%	6%	8%	7%	4%

N/A – Not Available

Health Care Access: Health Care Coverage

Key Findings

In 2020, 8% of Lucas County adults were without health care coverage. Those most likely to be uninsured were adults younger than the age of 30 (20%) and those with annual income levels under $25,000 (11%). The top reason adults reported for being without health care coverage was cost (37%).

In Lucas County, 8% of adults, or approximately 26,137 adults were uninsured.

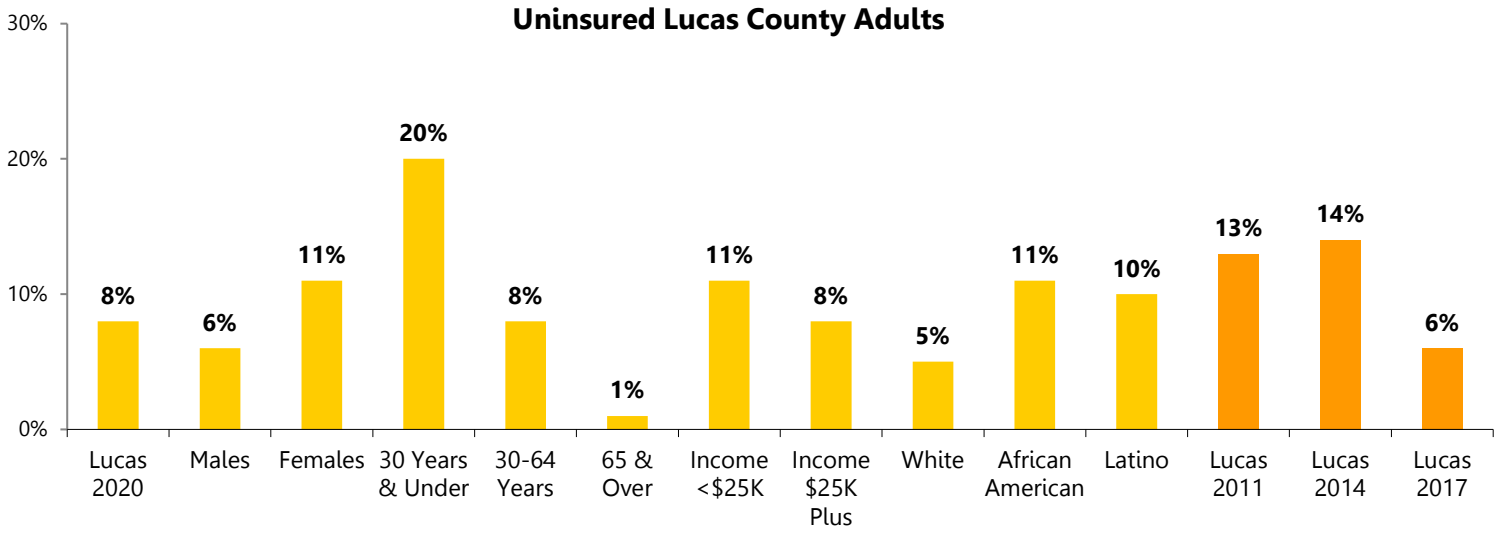
Health Care Coverage

- In 2020, 92% of Lucas County adults had health care coverage, leaving 8% who were uninsured.
- Twelve percent (12%) of adults with children did not have health care coverage, compared to 4% of those who did not have children living in their household.
- The top reasons uninsured adults gave for being without health care coverage were:
  1. They lost their job or changed employers (42%)
  2. Cost (29%)
  3. They became a part time or temporary employee (15%)
  4. They became ineligible (13%)
  5. They did not think they needed it (11%)

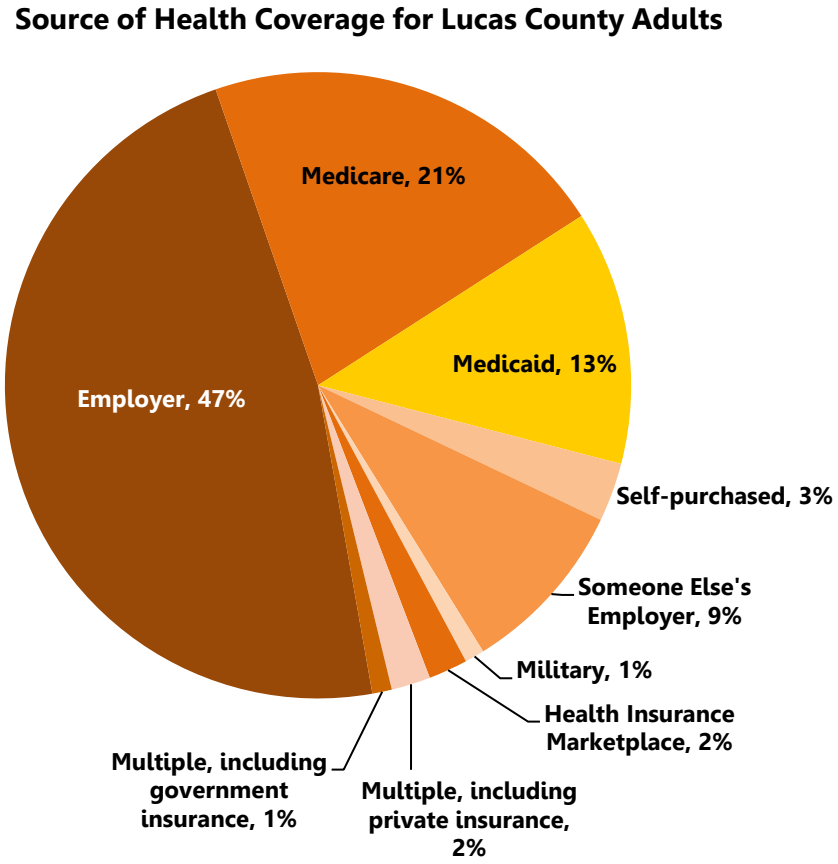
  (Percentages do not equal 100% because respondents could select more than one reason)
- The following types of health care coverage were used: employer (47%); Medicare (21%); Medicaid or medical assistance (13%); someone else's employer (9%); self-purchased plan (3%); multiple, including private insurance (2%); Health Insurance Marketplace (2%); multiple, including government insurance (1%); and military, CHAMPUS, TriCare, CHAMPVA or the VA (1%).
- Lucas County adults had the following issues regarding their health care coverage:
  - Cost (37%)
  - Opted out of certain coverage because they could not afford it (13%)
  - Could not understand their insurance plan (8%)
  - Limited visits (7%)
  - Opted out of certain coverage because they did not need it (6%)
  - Service not deemed medically necessary (6%)
  - Provider was no longer covered (6%)
  - Working with their insurance company (6%)
  - Service no longer covered (4%)
  - Pre-existing conditions (3%)

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Uninsured	12%	13%	14%	6%	8%	9%	11%

The following graph shows the percentage of Lucas County adults who were uninsured. Examples of how to interpret the information include: 8% of Lucas County adults were uninsured, including 11% of adults with annual incomes less than $25,000 and 20% of those younger than the age of 30. The pie chart shows sources of Lucas County adults' health care coverage.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



The following chart shows what is included in Lucas County adults' insurance coverage.

Health Coverage Includes:	Yes	No	Don't Know
Medical	98%	1%	1%
Prescription Coverage	93%	4%	3%
Preventive Health (e.g., well visits, cancer screenings, blood pressure tests)	87%	3%	10%
Immunizations	83%	3%	14%
Dental	78%	19%	3%
Vision/Eyeglasses	75%	20%	5%
Outpatient Therapy (e.g., occupational therapy, physical therapy)	74%	3%	23%
Mental Health	70%	4%	26%
Durable Medical Equipment (e.g., canes, walkers, oxygen)	49%	6%	45%
Alcohol and Drug Treatment	43%	9%	48%
Home Care	35%	8%	57%
Skilled Nursing/Assisted Living (e.g., inpatient rehab/therapy)	34%	7%	59%
Hospice	32%	6%	62%
Transportation	26%	17%	57%

Healthy People 2020
Access to Health Services (AHS)

Objective	Lucas County 2020	Ohio 2018	U.S. 2018	Healthy People 2020 Target
AHS-1.1: Increase the proportion of persons with medical insurance	100% age 18-24 79% age 25-34 96% age 35-44 93% age 45-54 91% age 55-64	90% age 18-24 89% age 25-34 91% age 35-44 94% age 45-54 94% age 55-64	85% age 18-24 84% age 25-34 87% age 35-44 90% age 45-54 93% age 55-64	100%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
(Sources: Healthy People 2020 Objectives, 2018 BRFSS, 2019/2020 Lucas County Health Assessment)
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Care Access: Access and Utilization

Key Findings

Eleven percent (11%) of Lucas County adults went outside of Lucas County for health care services in the past year. Twenty percent (20%) of adults looked for a program to help with depression, anxiety, or some mental health problem.

During the past year, 30% of adults or approximately 98,015 adults did not receive medical care due to cost/no insurance.

Health Care Access and Utilization

- Adults usually visited the following places for health care services when they were sick or needed advice:
  - Doctor's office (88%)
  - Urgent care center (40%)
  - Hospital emergency room (26%)
  - Family and friends (22%)
  - Internet (17%)
  - Chiropractor (10%)
  - In-store health clinic (7%)
  - Alternative therapies (5%)
  - Telemedicine (4%)
  - Called 9-1-1/used an ambulance service (3%)
  - Community health center (3%)
  - Veterans Affairs (VA) (2%)
  - Health department (1%)
  - Some other place (1%)
  - Two percent (2%) of adults indicated they had no usual place for health care services.

- The following prevented Lucas County adults from getting medical care in the past year: no need to go (30%), cost/no insurance (30%), office was not open when they could get there (7%), too long of a wait for an appointment (4%), did not trust or believe doctors (3%), no child care (2%), no transportation (1%), too embarrassed to seek help (1%), provider would not take their insurance (1%), distance (1%), concerned they would be treated differently (1%), and some other reason (12%).

- Eleven percent (11%) of adults went outside of Lucas County for health care services in the past year. Those that went outside of Lucas County for health care services gave the following reasons: went there because they used to live there (27%), there was a better quality program (17%), service was not available locally (9%), the wait list was too long in Lucas County (8%), did not like local services/provider (5%), hours not convenient (5%), had insurance restrictions (4%), worked there (4%), word of mouth (3%), had a bad experience locally (3%), and other reasons (33%).

- One-fifth (20%) of adults did not get their prescriptions from their doctor filled in the past year. Adults reported the following reasons for not getting their prescriptions filled in the past year: too expensive (59%), no insurance (24%), did not think they needed it (22%), no generic equivalent of what was prescribed (18%), did not have any prescriptions to be filled (17%), stretched current prescription by taking less than what was prescribed (15%), side effects (12%), fear of addiction (7%), transportation (3%), and they were already taking too many medications (3%).

- A living will is a written legal document that details adults' wishes for end-of-life medical care if they are unable to make decisions for themselves. More than one-fourth (26%) of Lucas County adults reported they had a living will, decreasing to 23% of those with annual incomes less than $25,000 and increasing to 57% of those over the age of 65.

- A durable power of attorney is a written legal document in which people name an individual who will make medical decisions for them when they are unable to do so. Eighteen percent (18%) of adults had a durable power of attorney, increasing to 43% of those over the age of 65 and decreasing to 17% of those with annual incomes less than $25,000.

- Of the Lucas County adults who did not have a living will or durable power of attorney, 82% had discussed their medical wishes with a family member or loved one.

Availability of Services

Lucas County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Lucas County adults who looked but did NOT find a specific program	Lucas County adults who looked and found a specific program
Depression, anxiety, or some mental health problem (20% of all adults looked)	31%	69%
Weight problem (10% of all adults looked)	50%	50%
Disability (8% of all adults looked)	36%	64%
Assistance with in-home care for an elderly or disabled adult (6% of all adults looked)	39%	61%
Family planning (6% of all adults looked)	28%	72%
Tobacco cessation (5% of all adults looked)	54%	46%
Marital or family problems (5% of all adults looked)	47%	53%
Assist in care for the elderly (either in-home or out-of-home, or adult day care) (5% of all adults looked)	42%	58%
Assist in care for the disabled (either in-home or out-of-home) (5% of all adults looked)	39%	61%
Alcohol abuse (4% of all adults looked)	67%	33%
End-of-life care or hospice care (4% of all adults looked)	47%	53%
Assistance with out-of-home placement for an elderly or disabled adult (4% of all adults looked)	46%	54%
Assisted living program for an elderly or disabled adult (4% of all adults looked)	48%	52%

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Lucas County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Lucas County adults who looked but did NOT find a specific program	Lucas County adults who looked and found a specific program
Drug abuse (3% of all adults looked)	56%	44%
Disabled adult program (3% of all adults looked)	55%	45%
Detoxification for opiates/heroin (3% of all adults looked)	53%	47%
Cancer support group/counseling (3% of all adults looked)	32%	68%
Day care for an elderly or disabled adult (2% of all adults looked)	79%	21%
Gambling abuse (1% of all adults looked)	100%	0%

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Care Access: Preventive Medicine

Key Findings

More than half (57%) of Lucas County adults had a flu vaccine during the past year. Nearly three-fourths (73%) of adults ages 65 and older had a pneumonia vaccination at some time in their life.

Preventive Medicine

- More than half (57%) of Lucas County adults had a flu vaccine during the past year, increasing to 77% of those 65 and older.
- More than one-third (37%) of adults have had a pneumonia vaccine in their life, increasing to 73% of those ages 65 and older.
- Lucas County adults have had the following vaccines:
  - Measles, mumps, and rubella (MMR) in their lifetime (80%)
  - Tetanus, diphtheria, and pertussis in the past ten years (72%)
  - Chicken pox vaccine in their lifetime (66%)
  - Hepatitis B vaccine in their lifetime (43%)
  - Influenza type B vaccine in their lifetime (40%)
  - Hepatitis A vaccine in their lifetime (35%)
  - Hemophilus influenzae or influenza type B vaccine in their lifetime (30%)
  - Meningococcal vaccine in their lifetime (24%)
  - Zoster (shingles) vaccine in their lifetime (20%)
  - Human papillomavirus (HPV) vaccine in their lifetime (18%)

Preventive Health Screenings and Exams

- In the past year, 58% of Lucas County women ages 40 and older had a mammogram.
- Half (50%) of men had a digital rectal exam in their lifetime, and 17% had one in the past year.
- See the Women's and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Lucas County adults.

Lucas County Adult Health Screening Results

General Screening Results	Total Sample*
Diagnosed with High Blood Pressure	39%
Diagnosed with High Blood Cholesterol	27%
Diagnosed with Diabetes	13%
Survived a Heart Attack	4%
Survived a Stroke	3%

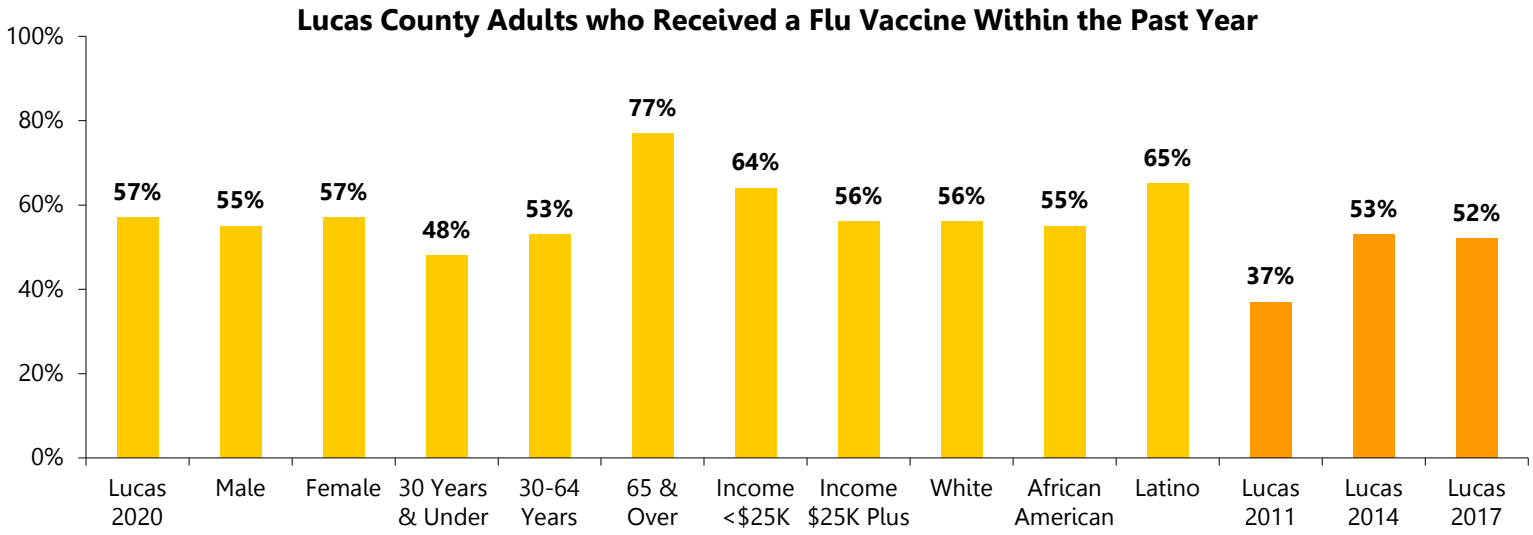
**Percentages based on all Lucas County adults surveyed.*

Health Care Topics Discussed by Lucas County Adults With Their Health Care Professional in the Past Year

Health Care Topics	Total 2007	Total 2011	Total 2014	Total 2017	Total 2020
Alcohol use	9%	9%	7%	8%	12%
Child care	N/A	N/A	N/A	N/A	2%
Depression, anxiety, or emotional problems	16%	21%	20%	19%	28%
Domestic violence	4%	3%	2%	1%	3%
Drug abuse	N/A	N/A	N/A	N/A	4%
E-cigarettes/vaping	N/A	N/A	N/A	N/A	3%
Education	N/A	N/A	N/A	N/A	4%
Family history	N/A	N/A	17%	28%	36%
Family planning	N/A	N/A	N/A	12%	5%
Financial strains	N/A	N/A	N/A	N/A	4%
Food access	N/A	N/A	N/A	N/A	9%
Housing	N/A	N/A	N/A	N/A	3%
Immunizations	N/A	N/A	N/A	N/A	29%
Injury prevention (e.g., safety belt use, helmet use & smoke detectors)	8%	10%	8%	6%	9%
Safe use of opiate-based pain medication (e.g., Percocet, Vicodin)	N/A	10%	10%	10%	8%
Safe use of prescription medication	N/A	N/A	N/A	15%	21%
Sexually transmitted diseases (STDs)	11%	10%	7%	8%	10%
Social connections	N/A	N/A	N/A	N/A	6%
Tobacco use	N/A	N/A	N/A	11%	14%
Training and employment	N/A	N/A	N/A	N/A	4%
Transportation	N/A	N/A	N/A	N/A	4%
Utilities	N/A	N/A	N/A	N/A	2%
Weight control (e.g., diet, physical activity)	78%	77%	76%	29%	30%

N/A – Not Available

The following graph shows the percentage of Lucas County adults who received a flu vaccine within the past year. Examples of how to interpret the information shown on the graph include: 57% of Lucas County adults received a flu vaccine within the past year, including 57% of females and 64% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Healthy People 2020
Immunization and Infectious Diseases (IID)

Objective	Lucas County 2020	Healthy People 2020 Target
IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	73%	90%
IID-12.7: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated annually against seasonal influenza	77%	90%
IID-14: Increase the percentage of adults who are vaccinated against zoster (shingles)	20%	30%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
(Sources: Healthy People 2020 Objectives, 2019/2020 Lucas County Community Health Assessment)

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Had a flu vaccine in the past year	31%	37%	53%	52%	57%	N/A	N/A
Had a flu vaccine in the past year (ages 65 and older)	N/A	62%	74%	73%	77%	63%	64%
Ever had a pneumonia vaccine in lifetime (ages 65 and older)	59%	61%	56%	71%	73%	75%	73%
Ever had a shingles or zoster vaccine	N/A	N/A	8%	18%	20%	29%	29%*

N/A – Not Available
**2018 BRFSS Data*

Health Care Access: Women's Health

Key Findings

In 2020, over half (58%) of Lucas County women older than the age of 40 reported having a mammogram in the past year. In the past year, 55% of Lucas County women had a clinical breast exam, and 35% had a Pap smear to detect cancer of the cervix. More than one-third (39%) were obese, 34% had high blood pressure, 27% had high blood cholesterol, and 16% were identified as current smokers, of which are all known risk factors for cardiovascular diseases.

Lucas County Female
Leading Causes of Death, 2016 – 2018

Total Female Deaths: 6,917

1. Heart Diseases (23% of all deaths)
2. Cancers (21%)
3. Chronic Lower Respiratory Diseases (7%)
4. Alzheimer's disease (7%)
5. Stroke (7%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Ohio Female
Leading Causes of Death, 2016 – 2018

Total Female Deaths: 182,368

1. Heart Diseases (22% of all deaths)
2. Cancers (20%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (6%)
5. Alzheimer's disease (6%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Women's Health Screenings

- Sixty-eight percent (68%) of women had a mammogram at some time in their life, and two-fifths (40%) had this screening in the past year.
- More than half (58%) of women ages 40 and older had a mammogram in the past year, and 76% had one in the past two years.
- Ninety-three percent (93%) of Lucas County women had a clinical breast exam at some time in their life, and 55% had one within the past year. Seventy-one percent (71%) of women ages 40 and older had a clinical breast exam in the past two years.
- Ninety-four percent (94%) of Lucas County women had a Pap smear at some time in their life, and 36% reported having had the exam in the past year. Seventy-one percent (71%) of all Lucas County women had a Pap smear in the past three years. Six percent (6%) of women reported the screening was not recommended by their doctor.

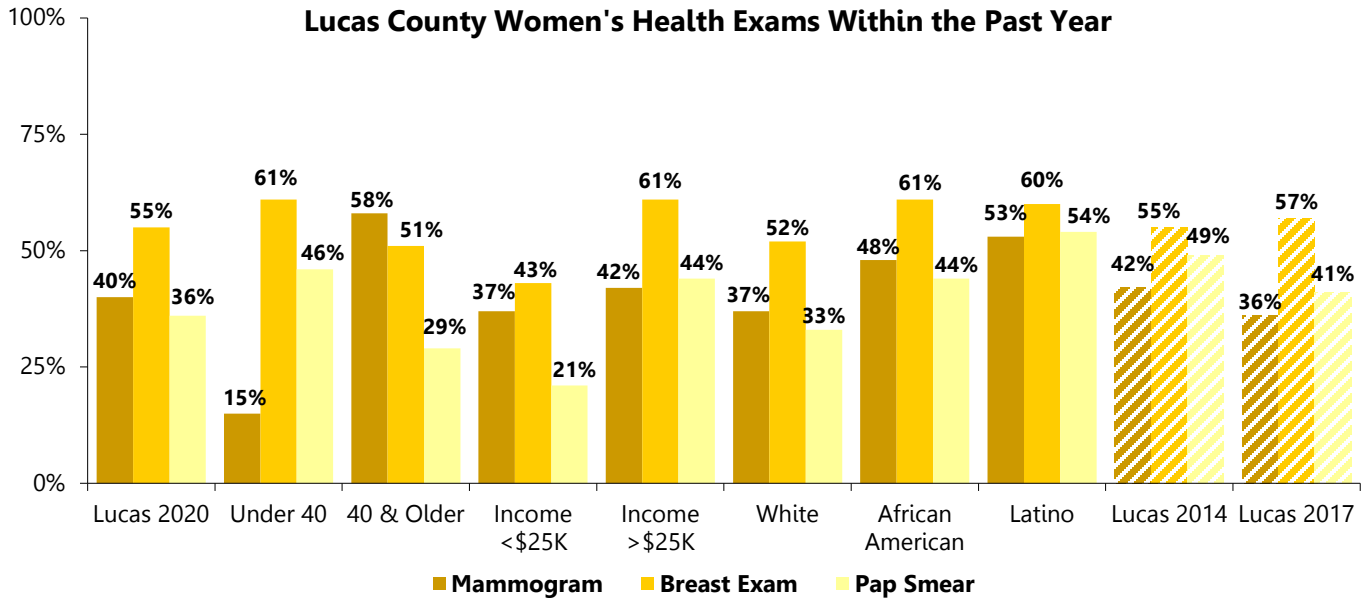
Pregnancy

- Sixteen percent (16%) of Lucas County women had been pregnant in the past five years.
- Thinking back to their last pregnancy, 56% of women wanted to be pregnant then, 20% wanted to be pregnant sooner, 15% did not want to be pregnant then or any time in the future, and 9% of women did not recall.

Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (51%), general or family physician (30%), family planning clinic (4%), community health center (1%), emergency room (<1%), and some other kind of place (<1%). Ten percent (10%) of women indicated they did not have a usual source of services for female health concerns.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In 2020, the health assessment identified that:
  - 67% of women were overweight or obese (2018 BRFSS reports 64% for Ohio and 61% for U.S.)
  - 34% were diagnosed with high blood pressure (2018 BRFSS reports 33% for Ohio and 31% for U.S.)
  - 27% were diagnosed with high blood cholesterol (2018 BRFSS reports 33% for Ohio and 32% for U.S.)
  - 16% of all women were current smokers (2018 BRFSS reports 19% for Ohio and 14% for U.S.)
  - 12% were diagnosed with diabetes (2018 BRFSS reports 13% for Ohio and 11% for U.S.)

The following graph shows the percentage of Lucas County female adults who had various health exams in the past year. Examples of how to interpret the information include: 40% of Lucas County females had a mammogram within the past year, 55% had a clinical breast exam, and 36% had a Pap smear.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2018	U.S. 2018
Had a clinical breast exam in the past two years (ages 40 and older)	N/A	N/A	72%	70%	71%	N/A	N/A
Had a mammogram within the past two years (ages 40 and older)	73%	74%	73%	75%	76%	74%*	72%*
Had a Pap smear in the past three years (ages 21-65)	77%*	72%*	73%*	68%*	77%	79%*	80%*

N/A – Not Available
**Includes all women regardless of age.*

Five Minutes for Women's Health

The CDC released five things women can do that can go a long way to improve or maintain good health. In five minutes or less women can:

- **Learn about the number one killer of women**: Heart disease is the leading cause of death for women in the U.S. Learn the symptoms of heart attack and stroke.
- **Schedule a check-up**: Regular check-ups are important. Schedule an appointment with your provider to discuss screenings and exams you need and when they are needed.
- **Protect your skin from the sun**: Skin cancer is the most common cancers among women n the U.S. Protect your skin and wear a broad spectrum sunscreen before you go outside.
- **Find an HIV, STD, and hepatitis testing site near you**: Untreated STDs can have long term consequences for women.
- **Take folic acid before and during pregnancy**: Folic acid can help prevent certain birth defects. If a woman has enough folic acid in her body before/during pregnancy, her baby may be less likely to have certain birth defects.

(Source: CDC, Health Equity, Five Minutes for Women's Health, Updated on September 12, 2017)

Health Care Access: Men's Health

Key Findings

More than half (58%) of Lucas County men had a digital rectal exam in their lifetime, and 17% had one in the past year. More than two-fifths (44%) of men had been diagnosed with high blood pressure, 27% had high blood cholesterol, and 14% were identified as smokers, which, along with obesity (36%), all of which are known risk factors for cardiovascular diseases.

Lucas County Male
Leading Causes of Death, 2016 – 2018

Total Male Deaths: 7,125

1. Heart Diseases (26% of all deaths)
2. Cancers (21%)
3. Accidents, Unintentional Injuries (9%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Ohio Male
Leading Causes of Death, 2016 – 2018

Total Male Deaths: 185,146

1. Heart Diseases (24% of all deaths)
2. Cancers (22%)
3. Accidents, Unintentional Injuries (9%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Men's Health Screenings

- More than half (58%) of Lucas County men had a digital rectal exam in their lifetime, and 17% had one in the past year.

Men's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes.

- In 2020, the health assessment identified that:
  - 77% of men were overweight or obese (2018 BRFSS reports 73% for Ohio and 71% for U.S.)
  - 44% were diagnosed with high blood pressure (2018 BRFSS reports 37% for Ohio and 35% for U.S.)
  - 27% were diagnosed with high blood cholesterol (2018 BRFSS reports 34% for Ohio and 35% for U.S.)
  - 14% had been diagnosed with diabetes (2018 BRFSS reports 12% for Ohio and 12% for U.S.)
  - 14% of all men were current smokers (2018 BRFSS reports 22% for Ohio and 18% for U.S.)

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Had a digital rectal exam within the past year	30%	26%	22%	18%	17%	N/A	N/A

N/A – Not Available

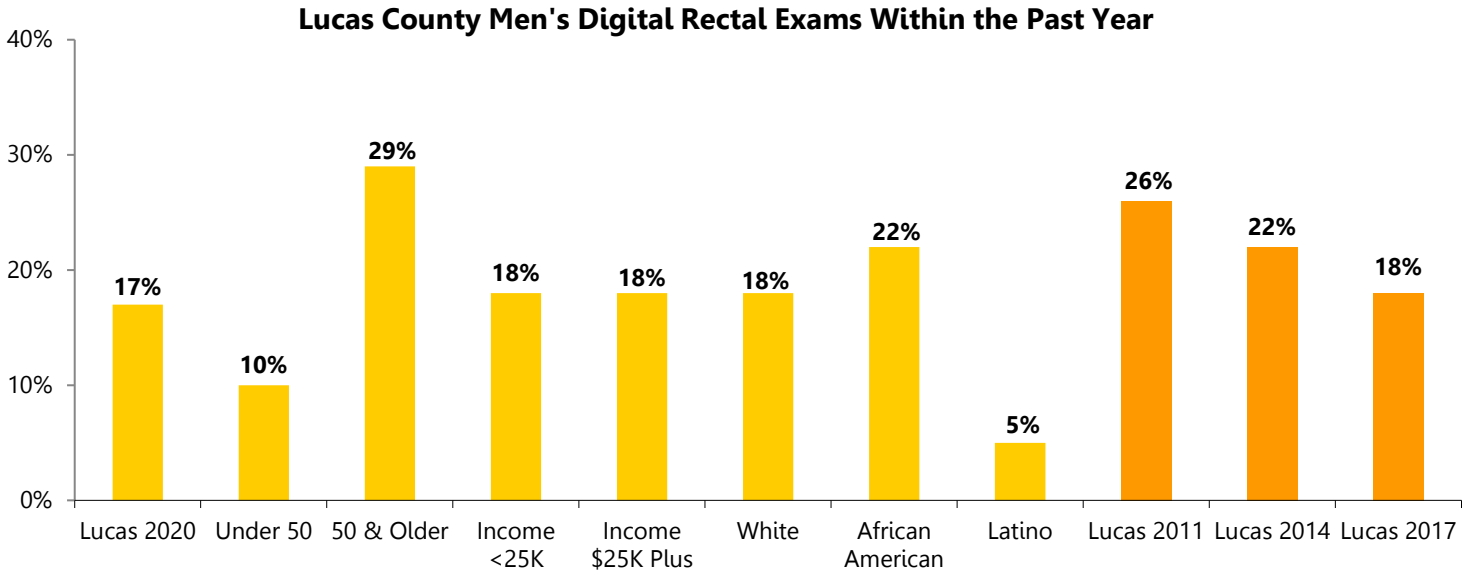
What is Prostate Cancer Screening?

Cancer screening means looking for cancer before it causes symptoms. The goal of screening is to find cancer early that may spread if not treated. There is no standard test to screen for prostate cancer. Two different tests are commonly used to screen for prostate cancer. Talk to your doctor about the below screenings if you are thinking about being screened:

- **A blood test called a prostate specific antigen (PSA) test**
  - PSA is a substance the prostate makes. This test measures the level of PSA a man's blood. The PSA level may be high if a man has prostate cancer and for many reasons, such as having an enlarged prostate, a prostate infection, or taking certain medicines.
- **A digital rectal examination**
  - A digital rectal exam is when a health care provide inserts a gloved, lubricated finger into a man's rectum to feel the prostate for anything abnormal, such as cancer.

(Source: CDC, Cancer Prevention and Control, Prostate Cancer Awareness, August 20, 2020)

The following graphs show the percentage of Lucas County males who had digital rectal exams in the past year. Examples of how to interpret the information include: 17% of Lucas County males had a digital rectal exam within the past year, including 29% of those ages 50 and older and 18% of those with annual incomes more than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Men and Heart Disease*

Heart disease is the leading cause of death for men in the United States, killing 347,879 men in 2017—that's about 1 in every 4 male deaths.

- About 1 in 13 (7.7%) white men and 1 in 14 (7.1%) Black men have coronary heart disease. About 1 in 17 (5.9%) Hispanic men have coronary heart disease.
- Half of the men who die suddenly of coronary heart disease had no previous symptoms. Even if you have no symptoms, you may still be at risk for heart disease.

High blood pressure, high LDL (low-density lipoprotein) cholesterol, and smoking are key risk factors for heart disease. About half of Americans (47%) have at least one of these three risk factors. Several other medical conditions and lifestyle choices can also put people at a higher risk for heart disease, including the following:

- Diabetes
- Overweight and obesity
- Unhealthy diet
- Physical inactivity
- Excessive alcohol use

To reduce your chances of getting heart disease, it's important to do the following:

- Know your blood pressure. Having uncontrolled blood pressure can result in heart disease. High blood pressure has no symptoms so it's important to have your blood pressure checked regularly.
- Talk to your health care provider about whether you should be tested for diabetes. Having diabetes raises your risk of heart disease.
- Quit smoking. If you don't smoke, don't start. If you do smoke, learn ways to quit.
- Discuss checking your cholesterol and triglyceride levels with your health care provider.
- Make healthy food. Being overweight or obesity raises your risk of heart disease.
- Limit alcohol intake to one drink a day.
- Lower your stress level and find healthy ways to cope with stress.

**The term heart disease refers to several types of heart conditions, including coronary artery disease and heart attack.*
(Source: CDC, Men and Heart Disease, Updated January 31, 2020)

Health Care Access: Oral Health

Key Findings

Sixty-four percent (64%) of Lucas County adults visited a dentist or dental clinic in the past year. One-fifth (20%) of adults did not see a dentist in the past year due to cost.

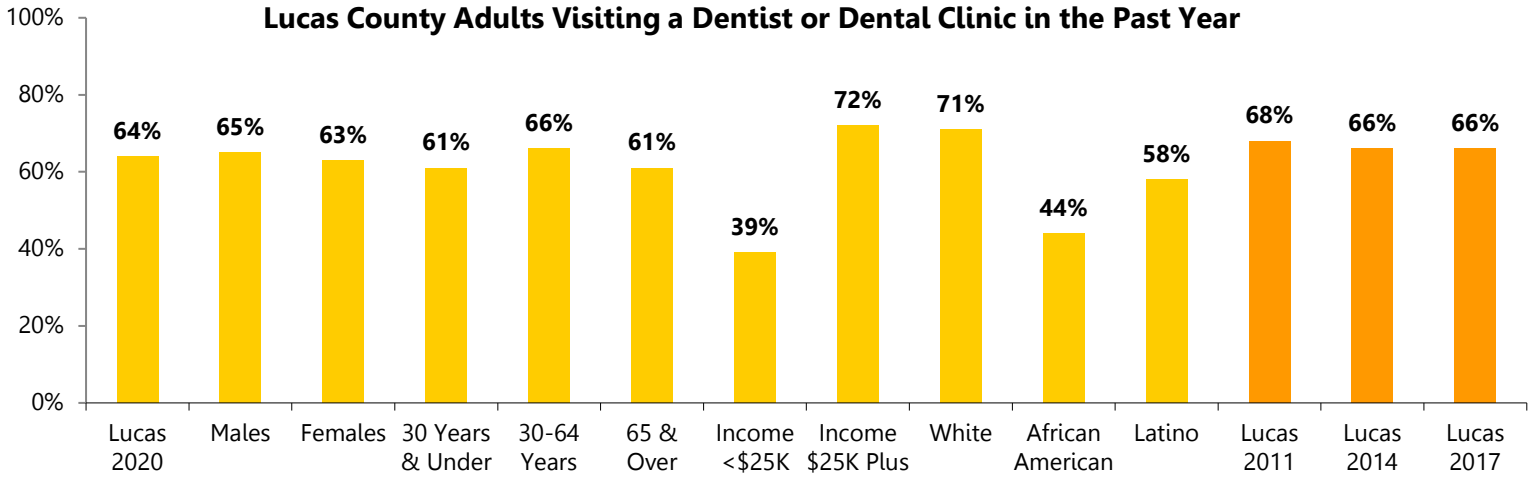
During the past year, 64% of adults or approximately 209,098 Lucas County adults visited a dentist or dental clinic.

Oral Health

- In the past year, 64% of Lucas County adults had visited a dentist or dental clinic, decreasing to 39% of those with annual incomes less than $25,000.
- Sixty-seven percent (67%) of Lucas County adults with dental insurance had been to the dentist in the past year, compared to 22% of those without dental insurance.
- Adults reported the following reasons for not visiting a dentist in the last year:
  - Cost (20%)
  - No reason to go/had not thought of it (19%)
  - Fear, apprehension, nervousness, pain, and dislike going (15%)
  - Had dentures (12%)
  - Did not have/know a dentist (6%)
  - Their dentist did not accept their insurance (3%)
  - Could not find a dentist taking Medicaid patients (2%)
  - Could not get into a dentist (1%)
  - Transportation (1%)
  - Other reasons (8%)
- Lucas County adults completed the following oral health habits daily: brushed their teeth (94%), used mouth wash (48%), and flossed their teeth (48%).
- Lucas County adults had the following oral health issues: pain (9%), difficulty eating/chewing (7%), oral bleeding (7%), problems with dentures (4%), loose teeth (4%), no teeth (4%), skipped meals due to pain (2%), missed work due to mouth pain (2%), and other (9%). Eleven percent (11%) of adults reported experiencing two or more oral health issues.

Adult Oral Health	Within the Past Year	Within the Past Two Years	Within the Past Five Years	Five or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	65%	10%	8%	11%	1%
Females	63%	18%	9%	8%	1%
Total	64%	15%	9%	9%	1%

The following graph shows the percentage of Lucas County adults who visited a dentist or dental clinic in the past year. Examples of how to interpret the information include: 64% of Lucas County adults had been to the dentist or dental clinic in the past year, including 65% of males and 39% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Visited a dentist or a dental clinic (within the past year)	66%	68%	66%	66%	64%	67%*	68%*

**2018 BRFSS Data*

Facts About Adult Oral Health

- The baby boomer generation is the first where most people will keep their natural teeth over their entire lifetime. This is largely because of the benefits of water fluoridation and fluoride toothpaste. However, threats to oral health, including tooth loss, continue throughout life.
- The major risks for tooth loss are tooth decay and gum disease that may increase with age because of problems with saliva production; receding gums that expose "softer" root surfaces to decay-causing bacteria; or difficulties flossing and brushing because of poor vision, cognitive problems, chronic disease, and physical limitations.
- Although more adults are keeping their teeth, many continue to need treatment for dental problems. This need is even greater for members of some racial and ethnic groups—about three in four (75%) Hispanics and non-Hispanic Black adults have an unmet need for dental treatment, as do people who are poor. These individuals are also more likely to report having poor oral health.
- In addition, some adults may have difficulty accessing dental treatment. For every adult aged 19 years or older without medical insurance, there are three who don't have dental insurance.
- Oral health problems include the following: untreated tooth decay, gum disease, tooth loss, oral cancer, and chronic diseases such as arthritis, heart disease, and strokes.

(Source: Centers for Disease Control and Prevention, Division of Oral Health, Adult Oral Health, December 19, 2019)

Health Behaviors: Health Status Perceptions

Key Findings

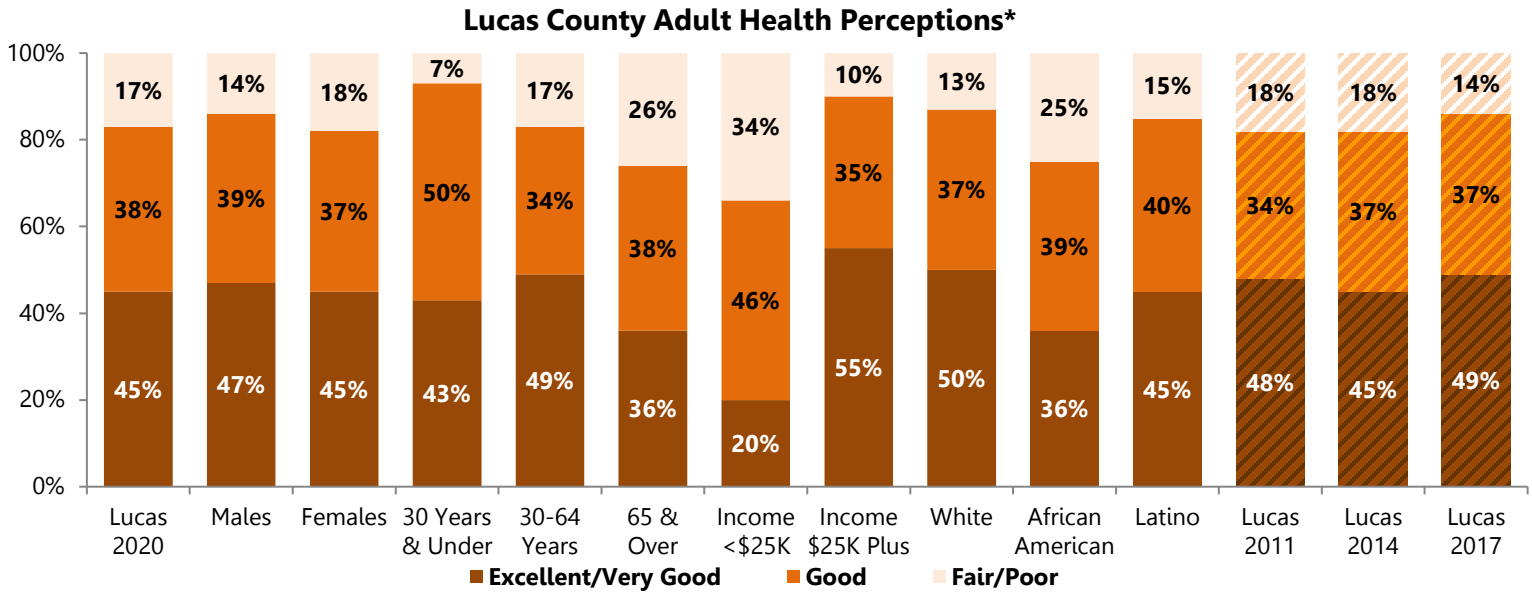
In 2020, 45% of Lucas County adults rated their health status as excellent or very good. Conversely, 17% of adults described their health as fair or poor, increasing to 34% of those with annual incomes less than $25,000.

17% of adults, or approximately 55,542 of Lucas County adults rated their general health as fair or poor.

General Health Status

- Forty-five percent (45%) of Lucas County adults rated their health as excellent or very good. Lucas County adults with higher annual incomes (55%) were most likely to rate their health as excellent or very good, compared to 20% of those with annual incomes less than $25,000.
- Seventeen percent (17%) of adults rated their health as fair or poor.
- Lucas County adults were most likely to rate their health as fair or poor if they:
  - Had been diagnosed with diabetes (37%)
  - Had an annual household income less than $25,000 (34%)
  - Were 65 years of age or older (26%)
  - Had high blood pressure (26%)
- Thiry-five percent (35%) of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.

The following graph shows the percentage of Lucas County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 45% of Lucas County adults, 43% of those under age 30, and 36% of those ages 65 and older rated their health as excellent or very good.



**Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Physical Health Status

- One-quarter (25%) of Lucas County adults rated their physical health as not good on four or more days in the previous month.
- Lucas County adults reported their physical health as not good on an average of 4.2 days in the previous month.
- Lucas County adults were most likely to rate their physical health as not good (on four or more days during the past month) if they:
  - Had an annual household income less than $25,000 (46%)
  - Were 65 years of age or older (31%)
  - Were female (26%)

Mental Health Status

- More than one-third (34%) of Lucas County adults rated their mental health as not good on four or more days in the previous month.
- Lucas County adults reported their mental health as not good on an average of 5.5 days in the previous month.
- Lucas County adults were most likely to rate their mental health as not good (on four or more days during the past month) if they:
  - Were under the age of 30 (62%)
  - Had an annual household income less than $25,000 (51%)
  - Were female (41%)

The table shows the percentage of adults with poor physical and mental health in the past 30 days.

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past Month*					
Males	47%	19%	6%	5%	14%
Females	46%	20%	5%	5%	16%
Total	47%	20%	5%	5%	15%
Mental Health Not Good in Past Month*					
Males	53%	12%	6%	3%	21%
Females	37%	18%	10%	2%	26%
Total	44%	15%	8%	2%	24%

**Totals may not equal 100% as some respondents answered, "Don't know."*

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Rated health as excellent or very good	51%	48%	45%	49%	45%	48%	51%
Rated general health as fair or poor	14%	18%	18%	14%	17%	19%	18%
Rated mental health as not good on four or more days (in the past month)	26%	25%	26%	37%	34%	N/A	N/A
Rated physical health as not good on four or more days (in the past month)	N/A	N/A	22%	24%	25%	N/A	N/A
Average number of days that mental health was not good (in the past month)*	N/A	N/A	4.3	6.0	5.5	4.6‡	4.0‡
Average number of days that physical health not good (in the past month)*	N/A	N/A	4.0	4.8	4.2	3.9‡	3.8‡
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	N/A	N/A	N/A	35%	35%	N/A	N/A

N/A – Not Available

‡2017 BRFSS as compiled by 2020 County Health Rankings

** County Health Rankings*

Health Behaviors: Adult Weight Status

Key Findings

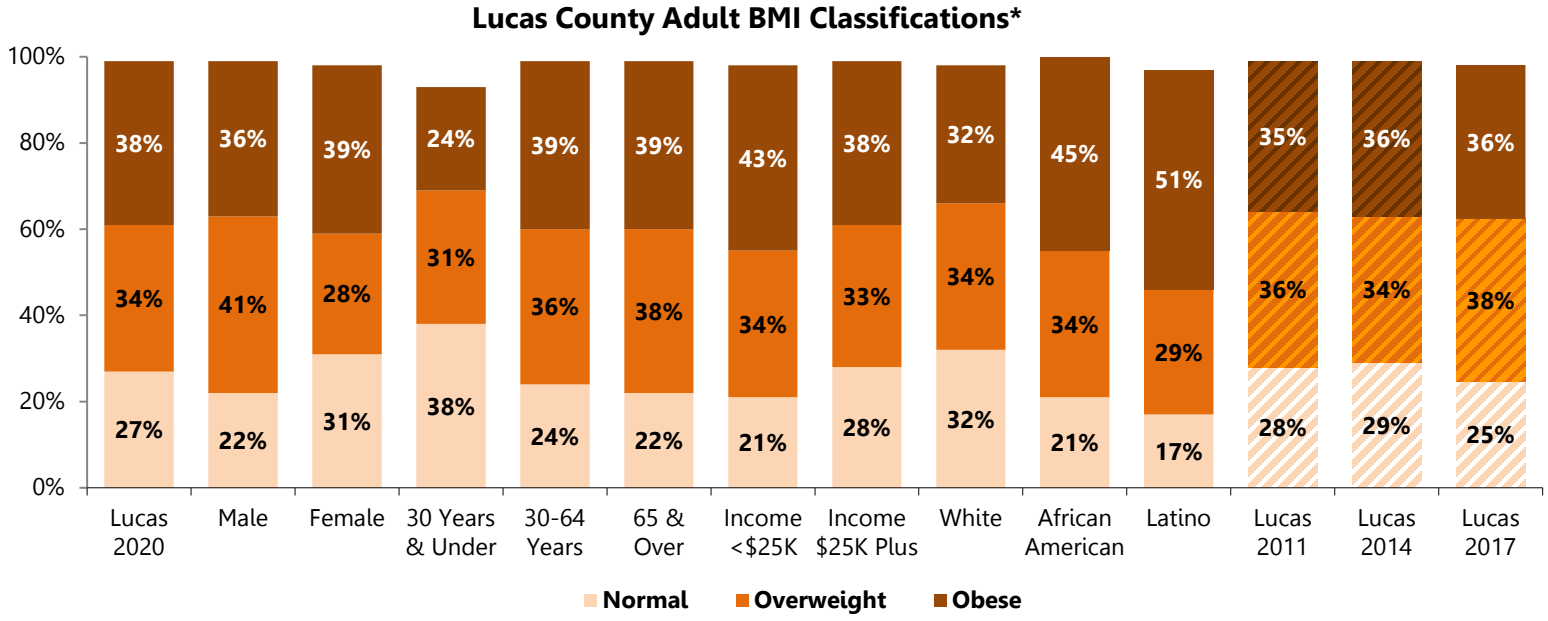
Nearly three-fourths (72%) of Lucas County adults were overweight (34%) or obese (38%) based on body mass index (BMI). One-fourth (25%) of adults did not participate in any physical activity in the past week, including 3% who were unable to exercise.

38% of Lucas County adults or approximately 124,152 adults were obese.

Adult Weight Status

- Nearly three-fourths (72%) of Lucas County adults were either overweight (34%) or obese (38%) by body mass index (BMI), putting them at elevated risk for developing a variety of diseases.
- More than half (51%) of adults were trying to lose weight, 29% were trying to maintain their current weight or keep from gaining weight, and 3% were trying to gain weight.
- Lucas County adults did the following to lose weight or keep from gaining weight in the past month: ate less food, fewer calories, or foods low in fat (46%); exercised (45%); drank more water (42%); ate a low-carb diet (16%); took diet pills, powders or liquids without a doctor's advice (3%); used a weight loss program (3%); smoked cigarettes (3%); went without eating 24 or more hours (2%); vomited after eating (2%); health coaching (2%); took prescribed medications (1%); took laxatives (1%); had bariatric surgery (<1%); participated in a prescribed dietary or fitness program (<1%); and other (3%).
- Lucas County adults spent an average of 3.0 hours watching TV, 2.1 hours on their cell phone, 1.4 hours on a PC/tablet, and 0.4 hours playing video games on an average day of the week.

The following graph shows the percentage of Lucas County adults who are overweight or obese by body mass index (BMI). Examples of how to interpret the information include: 27% of all Lucas County adults were classified as normal weight, 34% were overweight, and 38% were obese.



Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Overweight (BMI of 25.0 – 29.9)	37%	36%	34%	38%	34%	35%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	33%	35%	36%	36%	38%	35%	32%

Physical Activity

- In Lucas County, 55% of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. Twenty-eight percent (28%) of adults exercised 5 or more days per week. One fourth (25%) of adults did not participate in any physical activity in the past week, including 3% who were unable to exercise.

- Lucas County adults spent the most time doing the following physical activities in the past year: walking (28%), running/jogging (7%), exercise machines (5%), strength training (5%), occupational exercise (4%), group exercise classes (3%), cycling (2%), swimming (<1%), exercise videos (<1%) and other (5%). Twenty-eight percent (28%) of adults engaged in multiple types of exercise.

- Adults reported the following would help them use community parks, bike trails, and walking paths more frequently: more accessible parks, bike trails, and walking paths (31%); designated safe routes (27%); improvements to existing parks, trails, and paths (22%); and more public events and programs involving parks, trails, and paths (20%).

- Adults reported the following reasons for not exercising:
  - Time (25%)
  - Self-motivation/will power (20%)
  - Laziness (18%)
  - Weather (16%)
  - Too tired (16%)
  - Do not like to exercise (10%)
  - Choose not to exercise (10%)
  - Could not afford a gym membership (6%)
  - Ill or physically unable (5%)
  - Poorly maintained/no sidewalks (4%)
  - Pain or discomfort (4%)
  - No exercise partner (4%)
  - Neighborhood safety (3%)
  - No walking, biking trails, or parks (3%)
  - Afraid of injury (3%)
  - No child care (2%)
  - Do not know what activity to do (2%)
  - Too expensive (1%)
  - No transportation to a gym or other exercise opportunity (1%)
  - No gym available (1%)
  - Doctor advised them not to exercise (1%)
  - Lack of opportunities for those with physical impairments or challenges (1%)
  - Other (5%)

Nutrition

The table below indicates the number of servings of fruit, vegetables, sugar-sweetened beverages, and caffeinated beverages Lucas County adults consumed daily.

	5 or more servings daily	3-4 servings daily	1-2 Servings daily	0 servings daily
Fruit	1%	9%	77%	13%
Vegetables	3%	18%	73%	6%
Sugar-sweetened beverages	5%	9%	35%	51%
Caffeinated beverages	7%	21%	46%	26%

- In 2020, 37% of adults ate 1 to 2 servings of fruits and/or vegetables per day, 39% ate 3 to 4 servings per day, and 20% ate 5 or more servings per day. Four percent (4%) of adults ate no servings of fruits and vegetables per day.

Summary of the American Cancer Society (ACS) Guidelines on Nutrition and Physical Activity

1. *Achieve and maintain a healthy weight throughout life*
   - Be as lean as possible throughout life without being underweight.
   - Avoid excess weight gain at all ages. For those who are overweight or obese, losing even a small amount of weight has health benefits and is a good place to start.
   - Get regular physical activity and limit intake of high calorie foods and drinks as keys to help maintain a healthy weight.
2. *Be physically active*
   - Get at least 150-300 minutes of moderate intensity or 75-150 minutes of vigorous intensity activity each week (or a combination of these), preferably spread throughout the week.
   - Limit sedentary behavior such as sitting, lying down, watching TV, and other forms of screen-based entertainment.
   - Doing some physical activity above usual activities, no matter what one's level of activity, can have many health benefits.
3. *Eat a healthy diet, with an emphasis on plant foods*
   - Choose foods and drinks in amounts that help you get to and maintain a healthy weight.
   - Eat a variety of vegetables and whole fruits.
   - Choose whole grains instead of refined grain products.

(Source: American Cancer Society, Summary of the ACS Guidelines on Nutrition and Physical Activity, Updated on June 9, 2020)

- Lucas County adults reported they obtain their fresh fruits and vegetables from the following:
  - Large grocery store (such as Wal-Mart, Meijer, Kroger) (91%)
  - Farmers market (42%)
  - Local grocery store (such as Save-A-Lot) (26%)
  - Grow their own/garden (17%)
  - Dollar general/store (3%)
  - Food pantry (3%)
  - Group purchasing, community supported agriculture (CSA) (2%)
  - Corner/convenience stores (1%)
  - Community garden (1%)
  - Veggies mobile/mobile produce (1%)
  - Mail order food services (such as Blue Apron) (<1%)
  - Other (5%)

- Lucas County adults reported the following barriers to consuming fruits and vegetables: too expensive (10%), did not like the taste (4%), did not know how to prepare (3%), did not have access to fruits and vegetables (3%), no variety (1%), transportation (<1%), stores did not take EBT (<1%), and other barriers (4%).

- Lucas County adults reported the following reasons they chose the types of food they ate:
  - Taste/enjoyment (62%)
  - Healthiness of food (54%)
  - Cost (49%)
  - Ease of preparation/time (45%)
  - Food they were used to (33%)
  - Nutritional content (31%)
  - Calorie content (25%)
  - What their family prefers (24%)
  - Availability (23%)
  - If it is organic (12%)
  - Artificial sweetener content (8%)
  - If it is lactose free (7%)
  - If it is genetically modified (7%)
  - Other food sensitivities (6%)
  - Health care provider's advice (5%)
  - If it is gluten free (4%)
  - Limitations due to dental issues (3%)
  - Availability at food panty (3%)
  - Limitations set by WIC (1%)
  - Other reasons (4%)

Improving Fruit and Vegetable Access

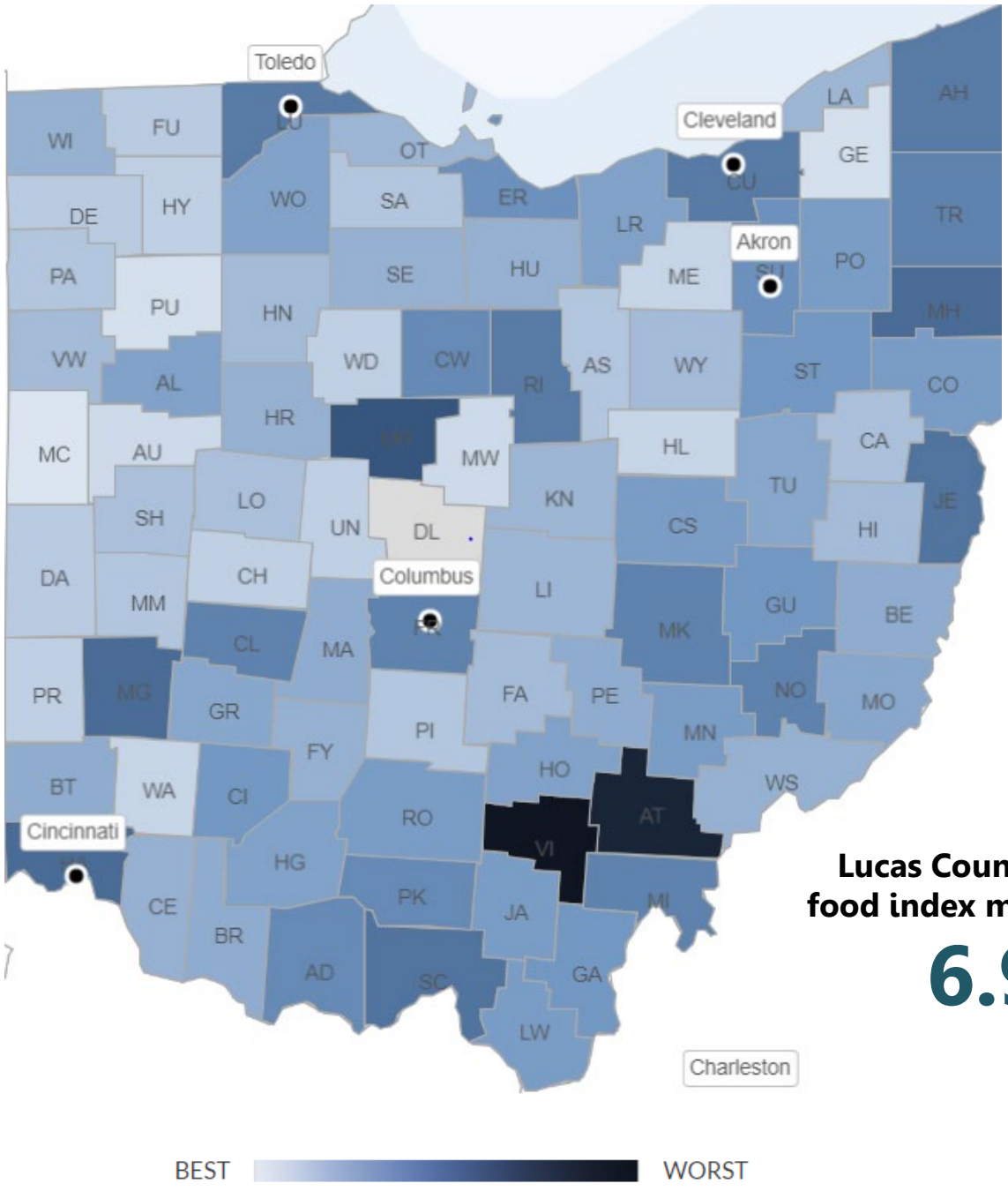
Poor diet quality is a leading risk factor associated with death and disability in the United States. Eating a diet rich in fruits and vegetables as part of an overall healthy diet can help protect against a number of serious and costly chronic diseases, including heart disease, type 2 diabetes, some cancers, and obesity. Fruits and vegetables also provide important vitamins and minerals that help the human body work as it should and fight off illness and disease.

- The 2015–2020 Dietary Guidelines for Americans recommends that adults consume 1.5–2 cups of fruits and 2–3 cups of vegetables per day.
- Despite these recommendations, recent data show low consumption. Only 1 in 10 US adults eat the recommended amount of fruits or vegetables each day.
- Income-related disparities exist, with 7% of adults who live at or below the poverty level meeting the daily vegetable recommendation, compared to 11.4% of adults with the highest household incomes.

(Source: CDC, State Indicator Report on Fruits and Vegetables, Updated June 2018)

The Food Environment Index measures the quality of the food environment in a county on a scale from zero to 10 (zero being the worst value in the nation, and 10 being the best). The two variables used to determine the measure are limited access to healthy foods and food insecurity.

- The food environment index in Lucas County is 6.9.
- The food environment index in Ohio is 6.7.



Lucas County had a food index measure of:

6.9

(Source: USDA Food Environment Atlas, as compiled by 2020 County Health Rankings)

Health Behaviors: Adult Tobacco Use

Key Findings

In 2020, 15% of Lucas County adults were current smokers, and 25% were considered former smokers. Four percent (4%) of adults used e-cigarettes or vapes in the past year. Seventy-six percent (76%) of adults reported they would support an ordinance to ban smoking in a vehicle with a minor present.

15% of Lucas County adults, or approximately 49,007 adults were current smokers.

Adult Tobacco Use Behaviors

- Fifteen percent (15%) of Lucas County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- One-quarter (25%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Lucas County adult smokers were more likely to have:
  - Annual incomes less than $25,000 (27%)
  - Been widowed (22%)
  - Been ages 30-64 (16%)
  - Been female (16%)
- Lucas County adults used the following tobacco products in the past year: cigarettes (19%); e-cigarette/vapes (4%); cigars (4%); chewing tobacco, snuff, or snus (2%); little cigars (2%); cigarillos (2%); hookah (1%); pipes (1%); and dissolvable tobacco (<1%).
- Over half (56%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Lucas County adults had the following rules/practices about smoking tobacco in their home: allowed only in certain rooms (6%), not allowed with children around (35%), and allowed anywhere (10%). Lucas County adults had the following rules/practices about smoking tobacco in their car: allowed inside their car (7%), never allowed (77%), allowed only when one or more windows are open (8%), and not allowed with children around (9%).
- Lucas County adults had the following rules/practices about using e-cigarettes/vapes in their home: never allowed (77%), allowed only in certain rooms (3%), not allowed with children around (29%), and allowed anywhere (13%). Lucas County adults had the following rules/practices about using e-cigarettes/vapes in their car: allowed inside their car (7%), never allowed (71%), allowed only when one or more windows are open (3%), and not allowed with children around (7%).
- Lucas County adults reported they would support an ordinance to ban smoking in the following places:
  - Vehicle with a minor present (76%)
  - Multi-unit housing (57%)
  - College/university campuses (57%)
  - Parks or ball fields (56%)
  - Rental homes (52%)
  - Fairgrounds (51%)
- Twenty percent (20%) of Lucas County adults reported they would not support an ordinance to ban smoking anywhere.

- Lucas County adults indicated e-cigarette vapor is harmful to the following: themselves (72%), an unborn child (66%), others (65%), and children (62%).
- Three percent (3%) of Lucas County adults did not believe e-cigarette vapor was harmful to anyone.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Current smoker (smoked on some or all days)	23%	24%	19%	14%	15%	21%	16%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	25%	23%	25%	23%	25%	24%	25%
Tried to quit smoking in the past year	85%	75%	74%	50%	56%	N/A	N/A
Used chewing tobacco or snuff in the past year	N/A	N/A	3%	3%	2%	N/A	N/A

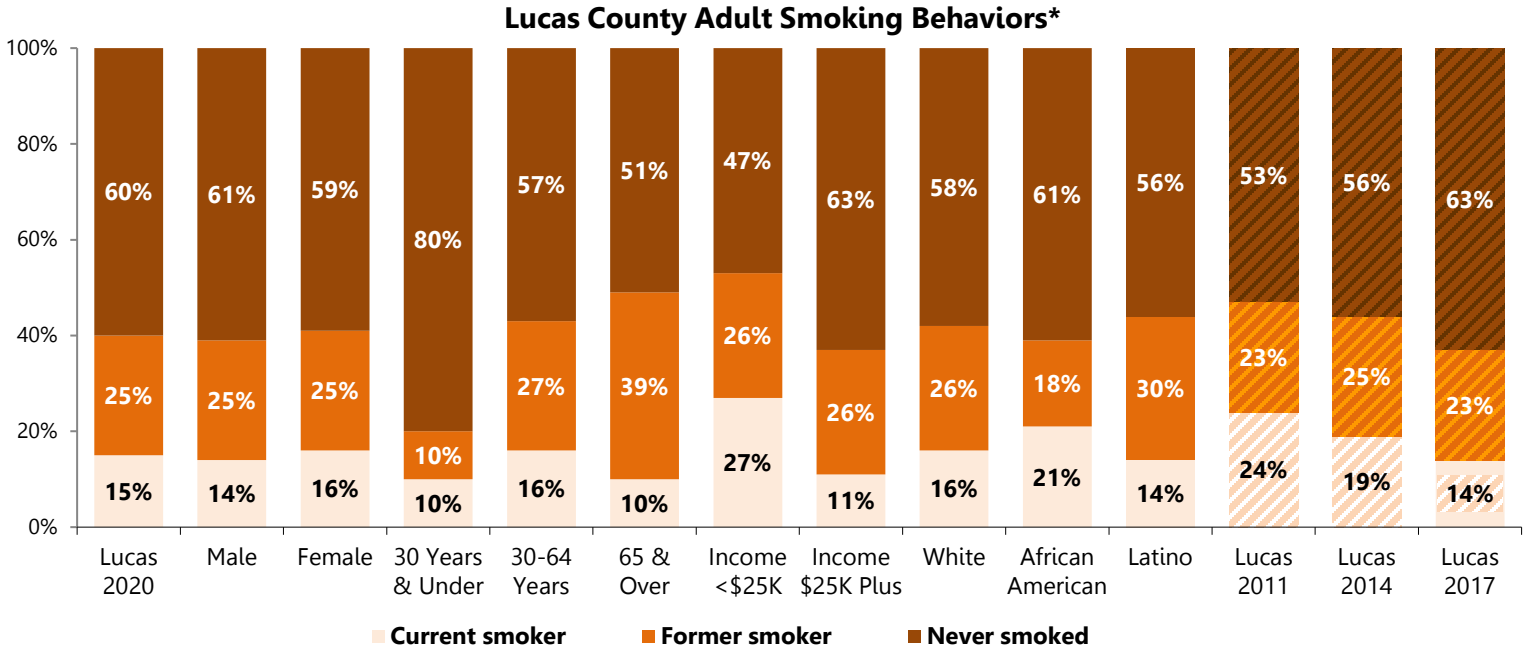
N/A – Not Available

E-Cigarette Health Effects

- **Most e-cigarettes contain nicotine, which has known health effects.**
  - Nicotine is highly addictive.
  - Nicotine is toxic to developing fetuses.
  - Nicotine can harm adolescent brain development, which continues into the early-to-mid-20s.
  - Nicotine is a health danger for pregnant women and their developing babies.
- **The e-cigarette aerosol that users breathe from the device and exhale can contain both harmful and potentially harmful substances**.
  - This includes nicotine; ultrafine particles that can be inhaled deep into the lungs; flavoring such as diacetyl, a chemical linked to a serious lung disease; volatile organic compounds; cancer-causing chemicals; and heavy metals such as nickel, tin, and lead.
  - It is difficult for consumers to know what e-cigarette products contain. For example, some e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.
  - Additionally, this includes cancer-causing chemicals and tiny particles that reach deep into lungs. However, e-cigarette aerosol generally contains fewer harmful chemicals than smoke from burned tobacco products.
- **E-cigarettes can cause unintended injuries.**
  - Defective e-cigarette batteries have caused fires and explosions, some of which have resulted in serious injuries. Most explosions happened when the e-cigarette batteries were being charged.
  - The Food and Drug Administration (FDA) collects data to help address this issue.
  - In addition, acute nicotine exposure can be toxic. Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid through their skin or eyes.
- **E-cigarettes are less harmful than regular cigarettes, but that doesn't mean they are safe.**
  - E-cigarette aerosol generally contains fewer toxic chemicals than the deadly mix of 7,000 chemicals in smoke from regular cigarettes. However, e-cigarette aerosol is not harmless. It can contain harmful and potentially harmful substances, including nicotine, heavy metals like lead, volatile organic compounds, and cancer-causing agents.
  - E-cigarettes are not currently approved by the FDA as a smoking cessation aid. The U.S. Preventive Services Task Force, a group of health experts that makes recommendations about preventive health care, has concluded that evidence is insufficient to recommend e-cigarettes for smoking cessation in adults, including pregnant women. However, according to the CDC, e-cigarettes may help non-pregnant adult smokers if used as a complete substitute for all cigarettes and other smoked tobacco products.

(Source: CDC, Smoking & Tobacco Use, About Electronic Cigarettes (E-Cigarettes), updated September 9, 2020)

The following graph shows Lucas County adults' smoking behaviors. Examples of how to interpret the information include: 15% of all Lucas County adults were current smokers, 25% of all adults were former smokers, and 60% had never smoked.



Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Cost of Smoking

Smoking leads to disease and disability, and it harms nearly every organ of the body.

- More than 16 million Americans are living with a disease caused by smoking.
- For every person who dies because of smoking, at least 30 people live with a serious smoking-related illness.
- Smoking causes cancer, heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis.
- Smoking also increases the risk for tuberculosis, certain eye diseases, and problems of the immune system, including rheumatoid arthritis.
- Smoking is a known cause of erectile dysfunction in males.

Smoking is the leading cause of preventable death.

- Worldwide, tobacco use causes more than 7 million deaths per year. If the pattern of smoking all over the globe doesn't change, more than 8 million people a year will die from diseases related to tobacco use by 2030.
- Cigarette smoking is responsible for more than 480,000 deaths per year in the United States, including more than 41,000 deaths resulting from secondhand smoke exposure. This is about one in five deaths annually, or 1,300 deaths every day.
- On average, smokers die 10 years earlier than nonsmokers.
- If smoking continues at the current rate among U.S. youth, 5.6 million of today's Americans younger than 18 years of age are expected to die prematurely from a smoking-related illness. This represents about one in every 13 Americans aged 17 years or younger who are alive today.

Smoking costs the United States billions of dollars each year. Total economic cost of smoking is more than $300 billion a year, including the following costs:

- Nearly $170 billion in direct medical care for adults.
- More than $156 billion in lost productivity due to premature death and exposure to secondhand smoke.

(Source: CDC, Smoking & Tobacco Use, Fast Facts, Updated May 21, 2020)

Health Behaviors: Adult Alcohol Consumption

Key Findings

Sixty percent (60%) of Lucas County adults had at least one alcoholic drink in the past month. Twenty-two percent (22%) of adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on one occasion in the last month and would be considered binge drinkers.

22% of Lucas County adults, or approximately 71,877 adults were considered binge drinkers.

Adult Alcohol Consumption

- Sixty percent (60%) of Lucas County adults had at least one alcoholic drink in the past month, increasing to 71% of males and those with annual incomes more than $25,000.
- Of those who drank, adults consumed 3.5 drinks on average, increasing to 4.3 drinks for males and 4.2 drinks for those with annual incomes less than $25,000.
- More than one-fifth (22%) of Lucas County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on one occasion in the last month and would be considered binge drinkers. Of those who drank in the past month, 42% had at least one episode of binge drinking.
- Twelve percent (12%) of adults reported driving after having perhaps too much alcohol to drink in the past month, increasing to 14% of those ages 30-64.
- Lucas County adults reported they or a family member experienced the following during the past 6 months:
  - Drank more than they expected (9%)
  - Drove a vehicle or other equipment after having any alcoholic beverage (6%)
  - Continued to drink despite problems caused by drinking (5%)
  - Used prescription drugs while drinking (5%)
  - Spent a lot of time drinking (4%)
  - Had to drink more to get same effect (4%)
  - Tried to quit or cut down but couldn't (3%)
  - Drank to ease withdrawal symptoms (3%)
  - Placed themselves or their family in harm (2%)
  - Gave up other activities to drink (2%)
  - Had legal problems (1%)
  - Failed to fulfill duties at work, home, or school (1%)
- Five percent (5%) of Lucas County adults had used a program or service to help with an alcohol problem for themselves or a loved one. Reasons for not using a program or service to help with an alcohol problem included the following: had not thought of it (6%), did not want to miss work (2%), stigma of seeking alcohol services (2%), fear (2%), could not afford to go (1%), transportation (1%), programs are always full (1%), unable to find a program (1%), did not have any openings (wait-listed) (1%), did not know how to find a program (1%), a program was not available (1%), did not want to get in trouble (<1%), and other (9%). Eighty-two percent (82%) of adults indicated that they did not need a program or service to help with an alcohol problem for themselves or a loved one.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Current drinker (had at least one drink of alcohol within the past month)	57%	57%	54%	65%	60%	53%	54%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	18%	23%	21%	24%	22%	18%	17%
Drove after having perhaps too much alcohol to drink (in the past month)	N/A	N/A	N/A	8%	12%	4%*	3%*

N/A – Not Available
**2018 BRFSS Data*

Drinking and Driving

Drinking and Driving Statistics in the United States

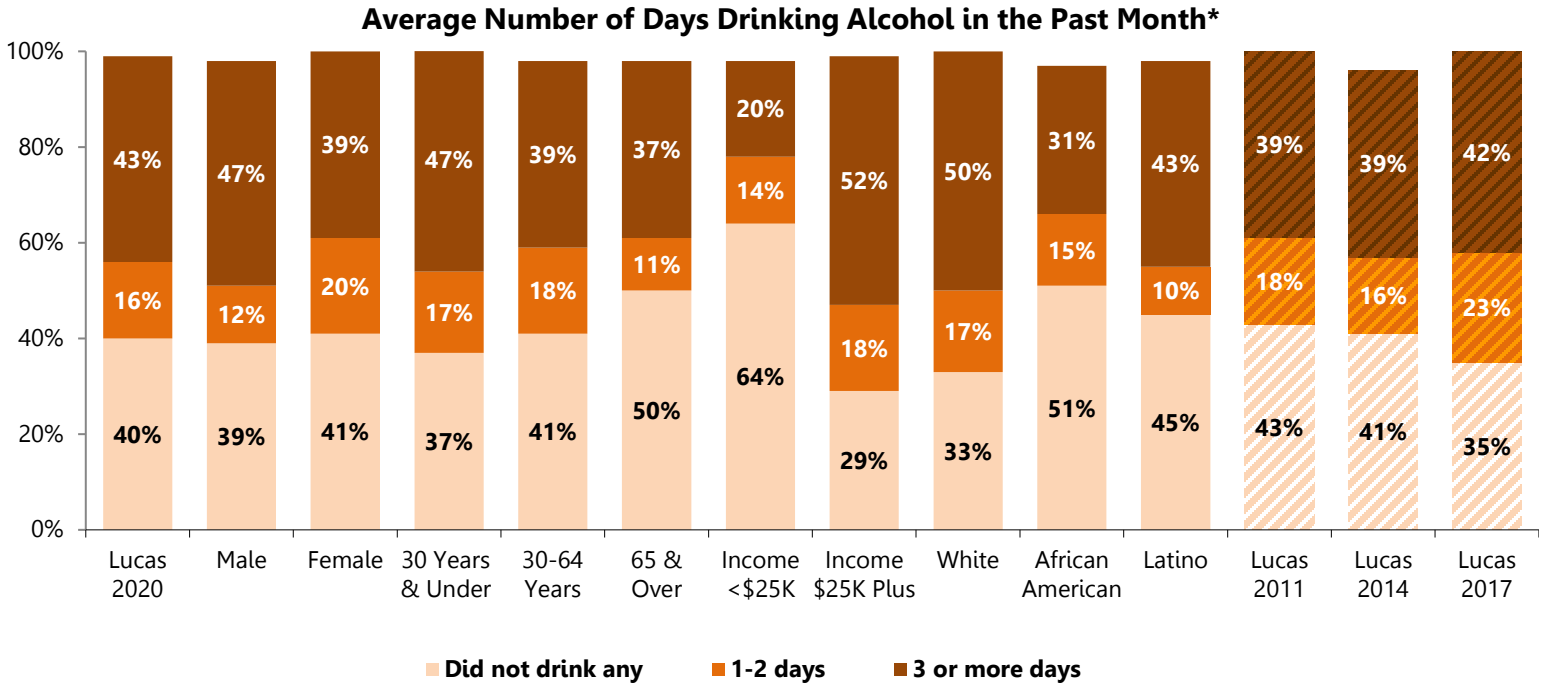
- Driving after drinking is deadly, yet it still happens across the Unites States. While impaired, someone could get arrested or worse, be involved in a traffic crash that cause injury or death.
- Approximately one-third of all traffic crash fatalities in the United States involve drunk drivers (with blood alcohol concentration of .08 grams of alcohol per deciliter (g/dL) or higher). In 2018, there were 10,511 people killed in these preventable crashes.
- On average, over the 10-year period from 2009-2018, more than 10,000 people died every year in drunk-driving crashes.
- In every state, it is illegal to drive with a blood alcohol concentration of .08 or higher, yet, in 2018, one person was killed in a drunk driving crash every 50 minutes in the United States.
- Men are more likely to be driving drunk in fatal crashes. In 2018, 21% of men were drunk in these crashes compared to 14% of women.

How alcohol affects driving ability

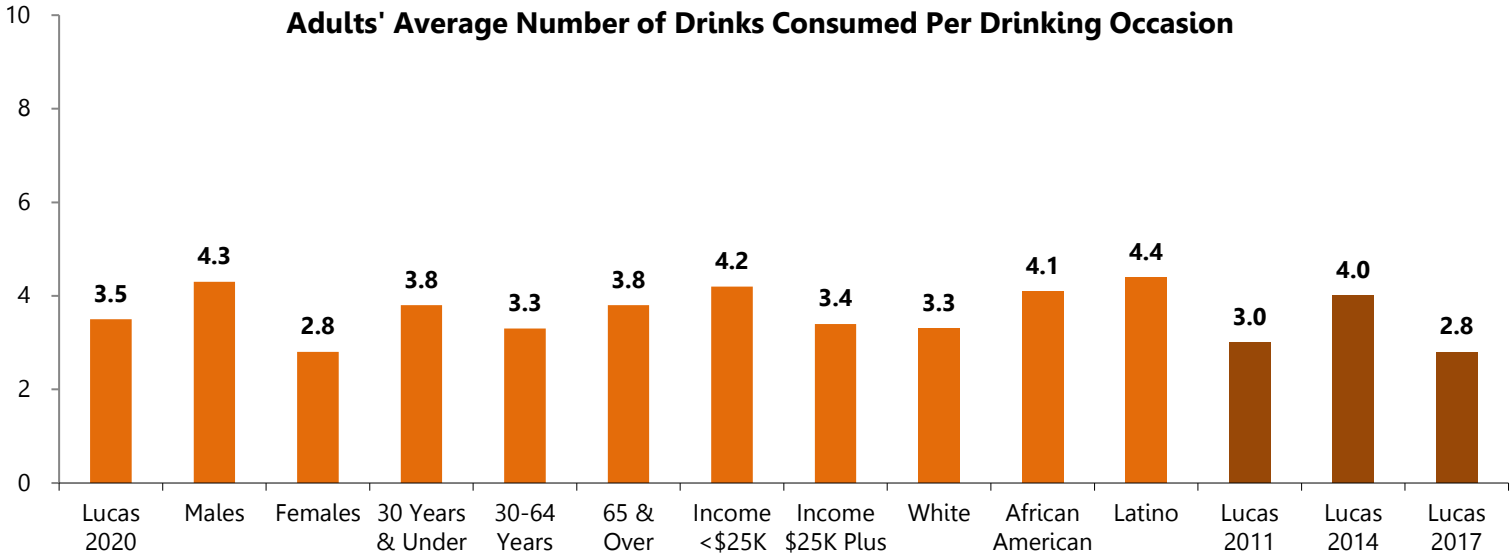
- As alcohol levels rise in a person's system, the negative effects on the central nervous system increase.
- Alcohol is absorbed directly through the walls of the stomach and small intestine. It then passes into the bloodstream, where it accumulates until it is metabolized by the liver. This is called blood alcohol concentration, or BAC.
- At a BAC level of .08 grams of alcohol per deciliter (g/dL) of blood, the risk for crash increases exponentially. Because of this risk, it's illegal in all 50 states to drive with a BAC of .08 or higher.
- In 2018, there were 1,878 people killed in alcohol-related crashed where drivers had BACs below the legal threshold for drunk driving (i.e., BACs below .08 g/dL)

(Source: National Highway Traffic Safety Administration, Drunk Driving, Retrieved September 1, 2020).

The following graphs show the percentage of Lucas County adults consuming alcohol and the amount consumed on average in the past month. Examples of how to interpret the information shown on the first graph include: 40% of all Lucas County adults did not drink alcohol in the past month, including 41% of females and 50% of those ages 65 and older.



**Percentages may not equal 100% as some respondents answered, "Don't know."*



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: Adult Drug Use

Key Findings

In 2020, 16% of Lucas County adults reported they and/or an immediate family member or someone in their household used recreational marijuana during the past 6 months. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Adult Drug Use

- Lucas County adults reported that they and/or an immediate family member/someone in their household used the following in the past 6 months:
  - Recreational marijuana or hashish (16%)
  - Wax, oil, or edibles with THC (13%)
  - Medical marijuana (9%)
  - Amphetamines, methamphetamine or speed (5%)
  - Cocaine, crack, or coca leaves (2%)
  - Bath salts (2%)
  - LSD, mescaline, peyote, psilocybin, DMY, or mushrooms (2%)
  - Inappropriate use of over-the-counter medications (2%)
  - Heroin/fentanyl (2%)
  - Ecstasy, E, or GHB (2%)
  - Inhalants (1%)
  - Synthetic marijuana/k2 (1%)

- Seven percent (7%) of Lucas County adults reported using recreational marijuana or hashish in the past 6 months.

- Lucas County adults reported that they and/or an immediate family member/someone in their household took the following medications not prescribed to them to feel good, high and/or more active or alert during the past 6 months:
  - Tranquilizers such as Valium or Xanax (6%)
  - Steroids (5%)
  - Codeine, Demerol, Morphine, Percocet, Dilaudid, or Fentanyl (5%)
  - Ritalin, Adderall, Concerta, or other ADHD medication (5%)
  - OxyContin (4%)
  - Tramadol/Ultram (4%)
  - Vicodin (4%)
  - Suboxone or Methadone (2%)
  - Neurontin (2%)

- Three percent (3%) of Lucas County adults reported being prescribed opioid based medication and had trouble stopping.

- As a result of using drugs, Lucas County adults indicated they or someone in their household experienced the following: failed a drug screen (2%), regularly failed to fulfill obligations at work or home (2%), had legal problems (1%), were placed in dangerous situations (1%), and overdosed and required EMS/hospitalization (<1%).

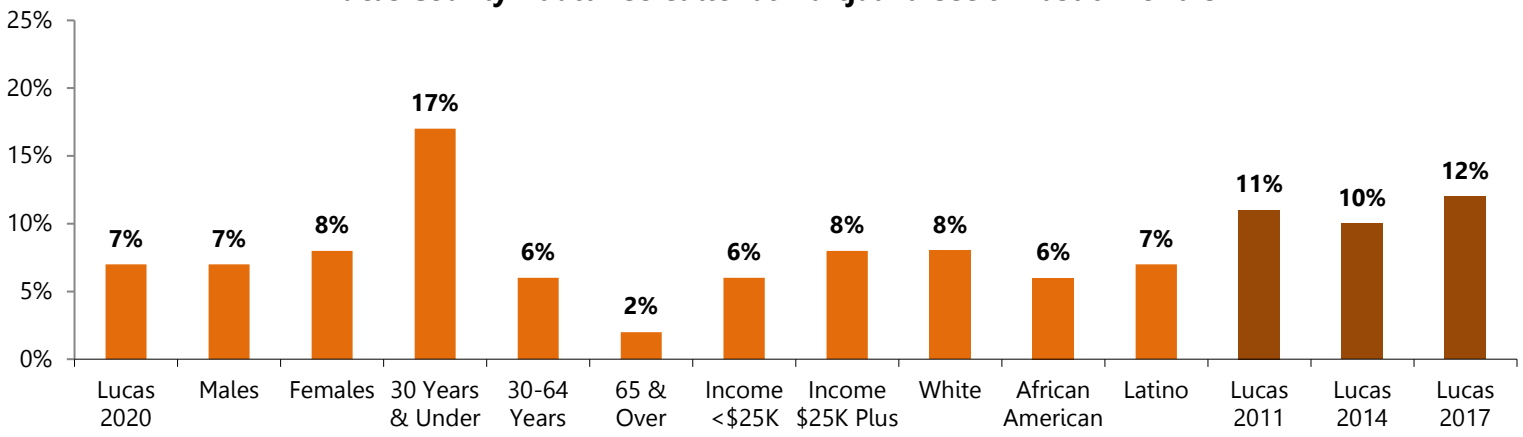
- Two percent (2%) of Lucas County adults had used a program or service to help with a drug problem for themselves or a loved one. Reasons for not using a program or service to help with a drug problem included the following: had not thought of it (3%), insurance did not cover it (1%), did not want to miss work (1%), did not have any openings (wait-listed) (1%), transportation (<1%), fear (<1%), could not afford to go (<1%), wait time (<1%), a program was not available (<1%), stigma of seeking drug services (<1%), did not want to get in trouble (<1%), and other (4%). Ninety-two percent (92%) of adults indicated that they did not need a program or service to help with a drug problem for themselves or a loved one.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Adults who used marijuana in the past 6 months	9%	11%	10%	12%	7%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	6%	8%	10%	6%	8%	N/A	N/A
Adults who used heroin in the past 6 months	<1%	1%	<1%	<1%	<1%	N/A	N/A

N/A – Not Available

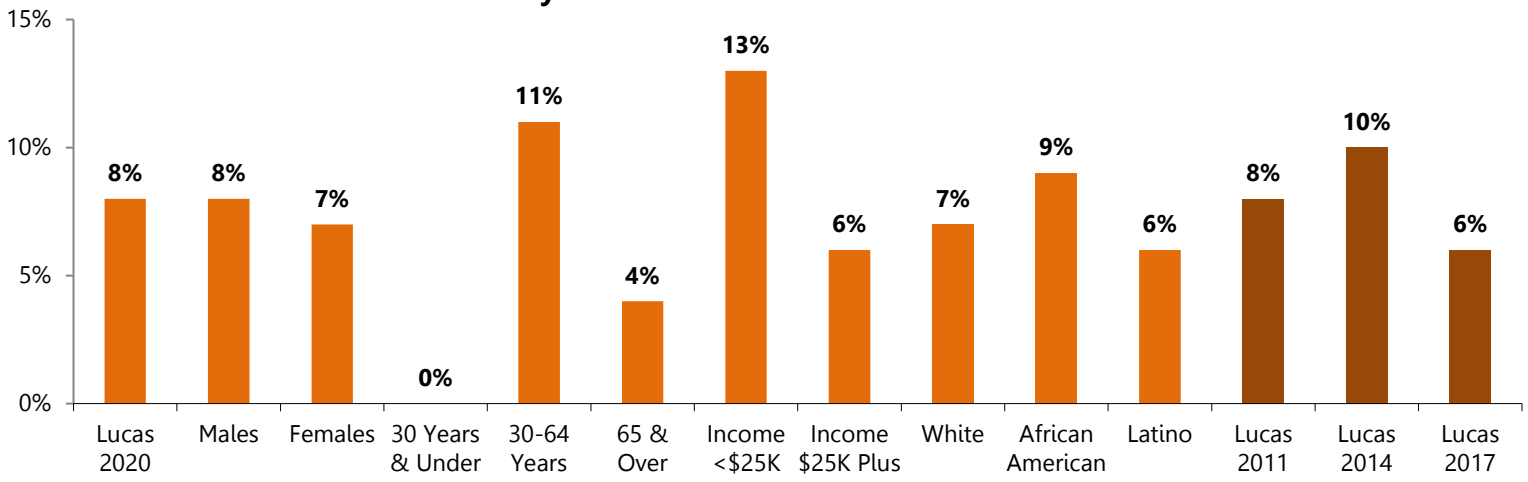
The following graphs indicate adult recreational marijuana use and prescription drug use in the past 6 months. Examples of how to interpret the information on the first graph include: 7% of Lucas County adults used recreational marijuana in the past 6 months, including 17% of those ages 30 and under and 8% of those with annual incomes of $25,000 or more.

Lucas County Adult Recreational Marijuana Use in Past 6 Months



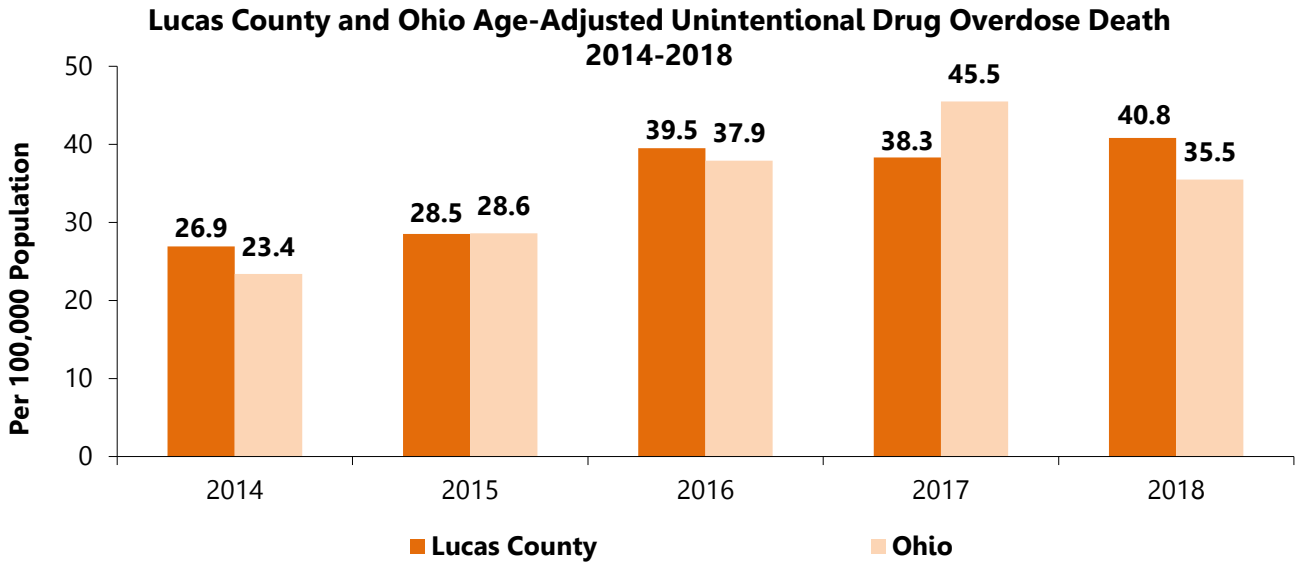
**Does not include wax or oil with THC edibles.*

Lucas County Adult Medication Misuse in Past 6 Months

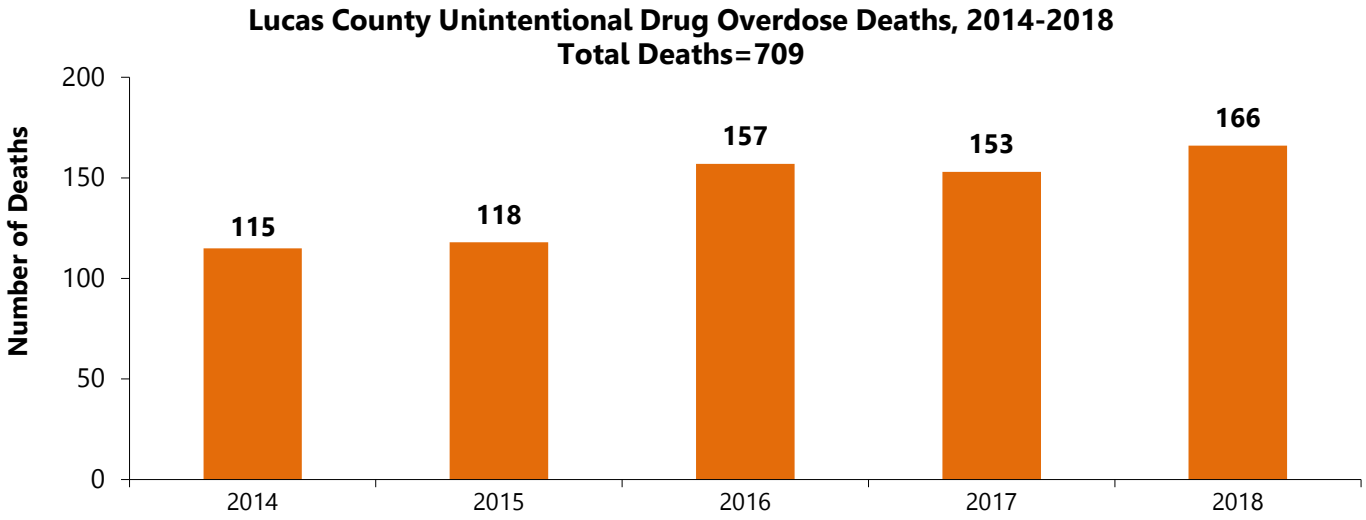


Notes for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the Lucas County and Ohio age-adjusted unintentional drug overdose deaths from 2014 to 2018.

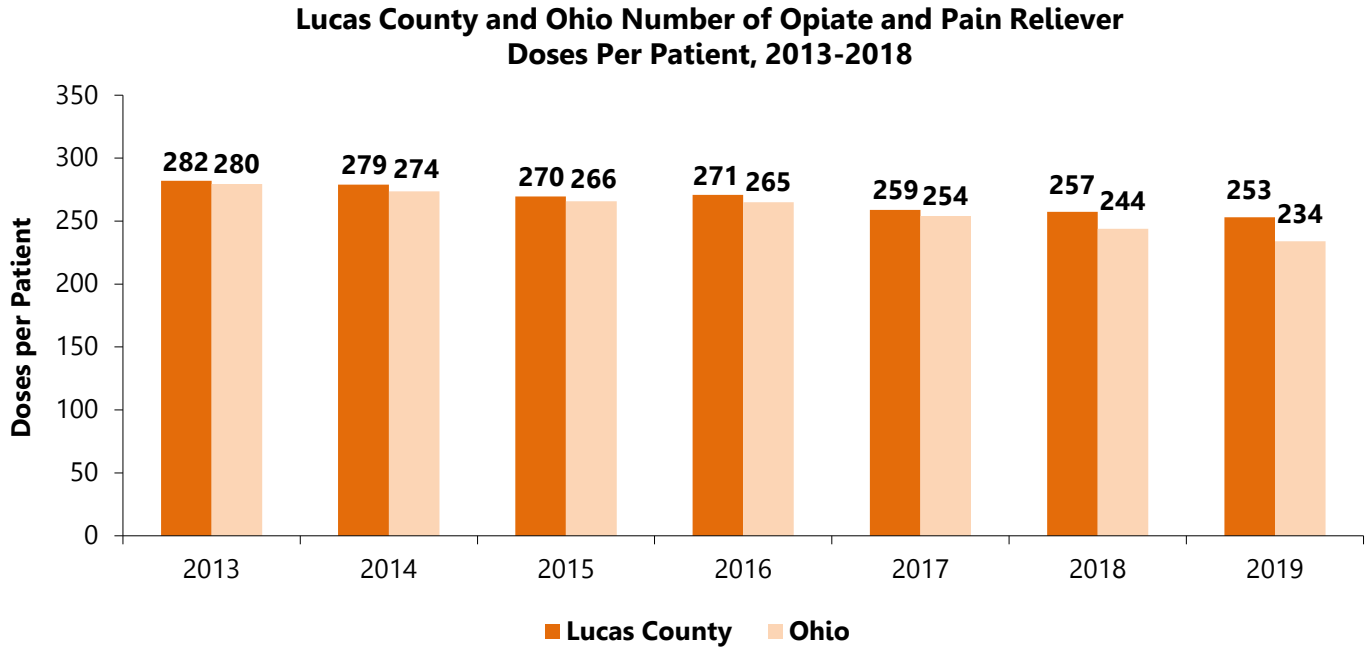


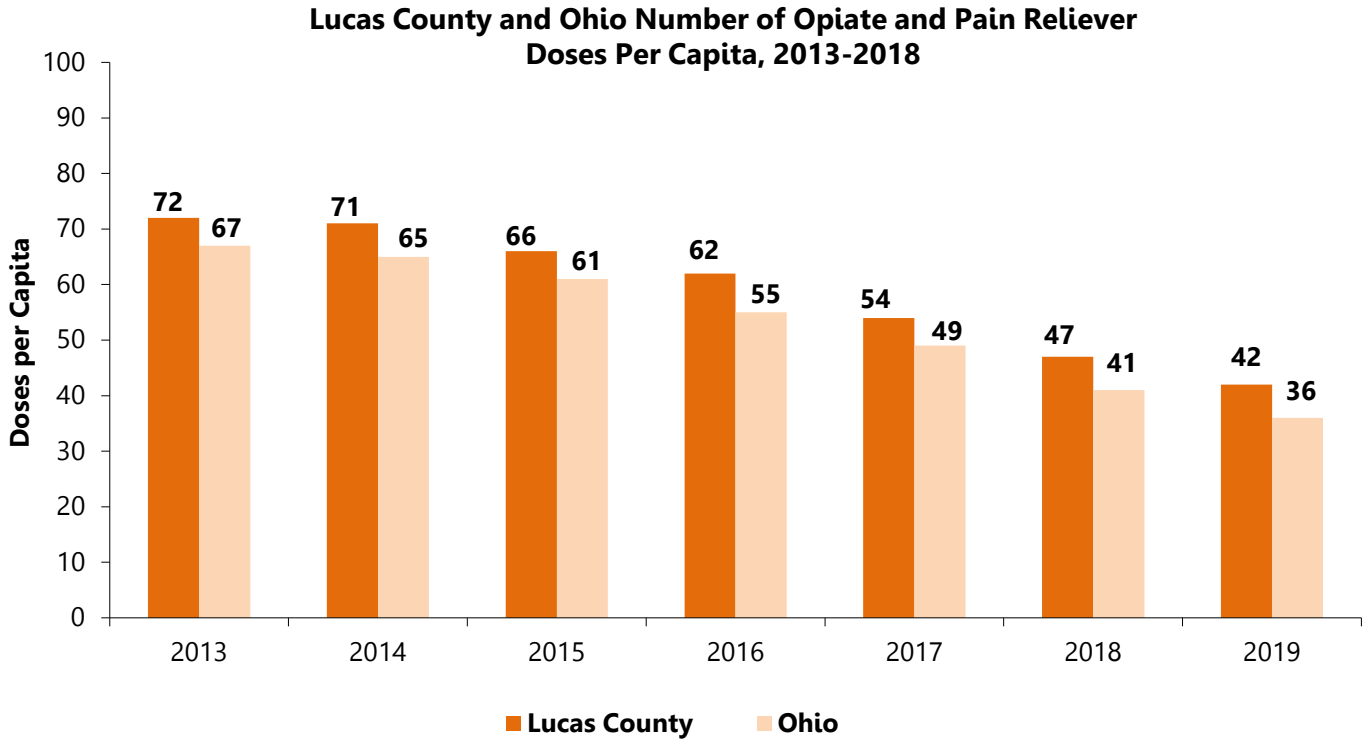
The following graph shows the number of unintentional drug overdose deaths from 2014 to 2018 in Lucas County.



(Source for graphs: Ohio Public Health Data Warehouse, 2014-2018, Updated 7/17/20)

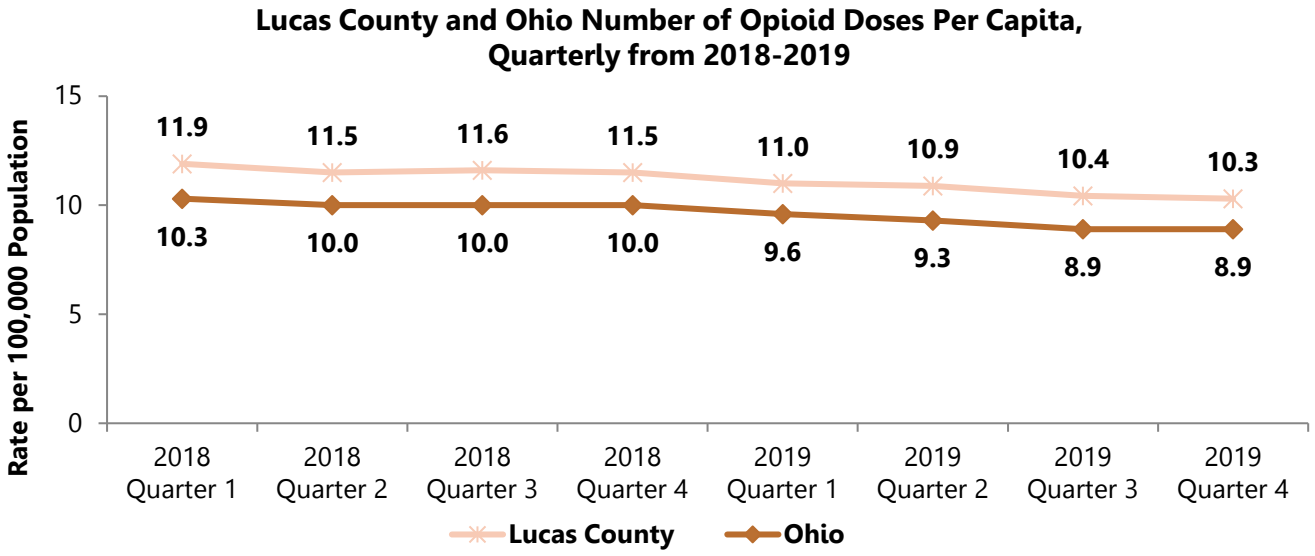
The following graphs are data from the Ohio Automated Prescription Reporting System (OARRS) indicating Lucas County and Ohio opiate and pain reliever doses per patient, as well as doses per capita.

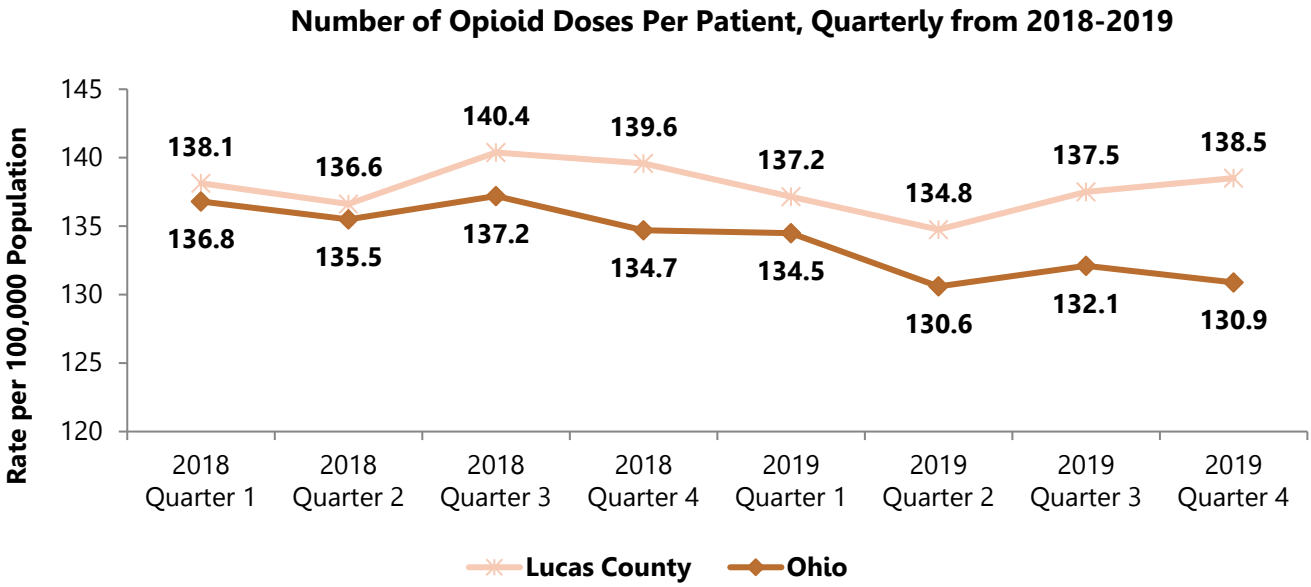




(Source for graphs: Ohio Automated Rx Reporting System, Quarterly County Data)

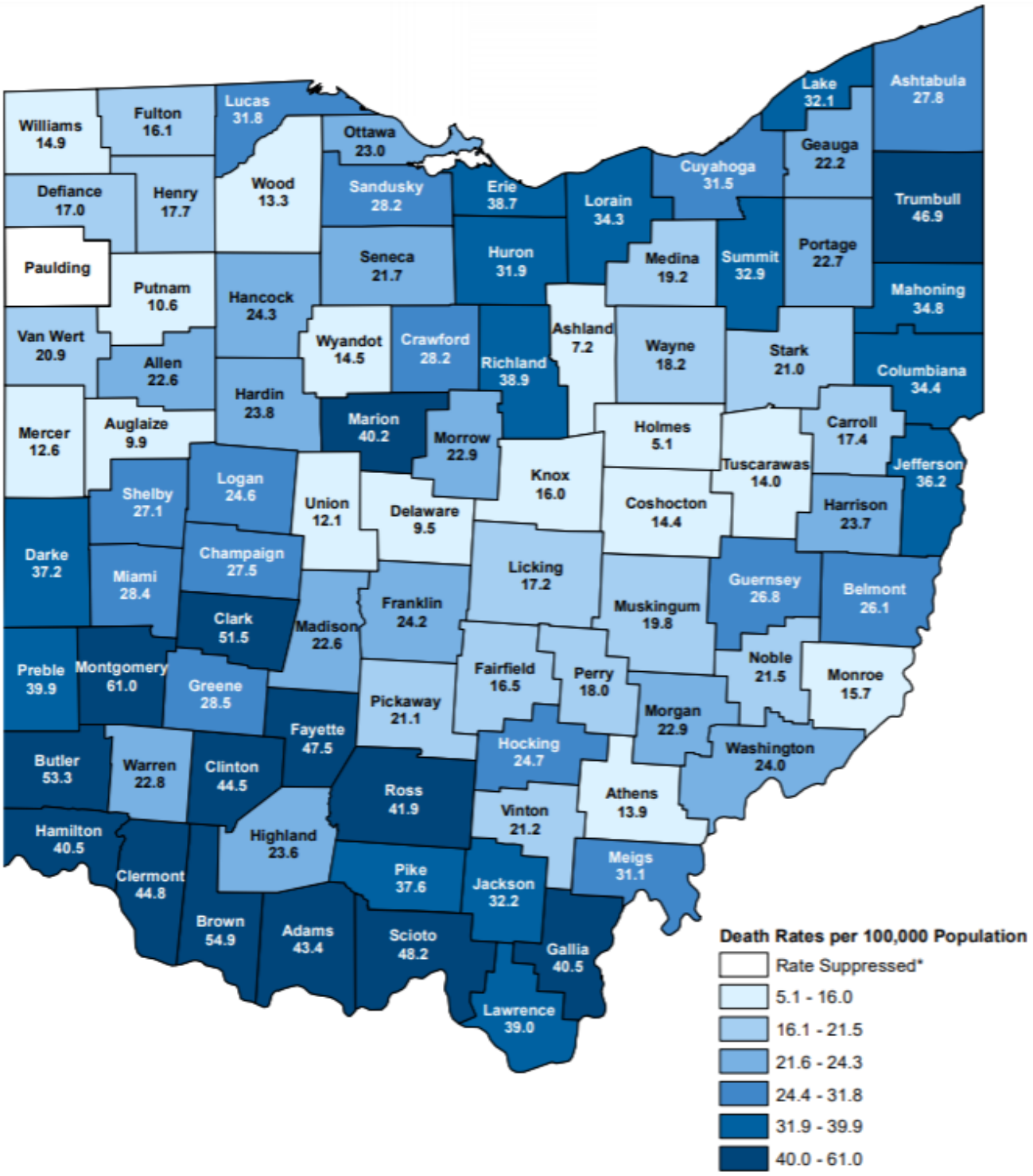
The following graphs show Lucas County and Ohio quarterly opiate and pain reliever doses per capita and per patient.





(Source for graphs: Ohio's Automated Rx Reporting System, 2018-2019)

The following map illustrates the average age-adjusted unintentional drug overdose death rate per 100,000 population, by county, from 2013 to 2018.



(Source: Ohio Department of Health, 2018 Ohio Drug Overdose Data: General Findings)

Health Behaviors: Adult Sexual Behavior

Key Findings

Sixty-three percent (63%) of Lucas County adults had sexual intercourse in the past year. Seven percent (7%) of adults had more than one partner. Nine percent (9%) of Lucas County adults were forced to have any sort of unwanted sexual activity, increasing to 13% of females and 16% of those with annual incomes less than $25,000.

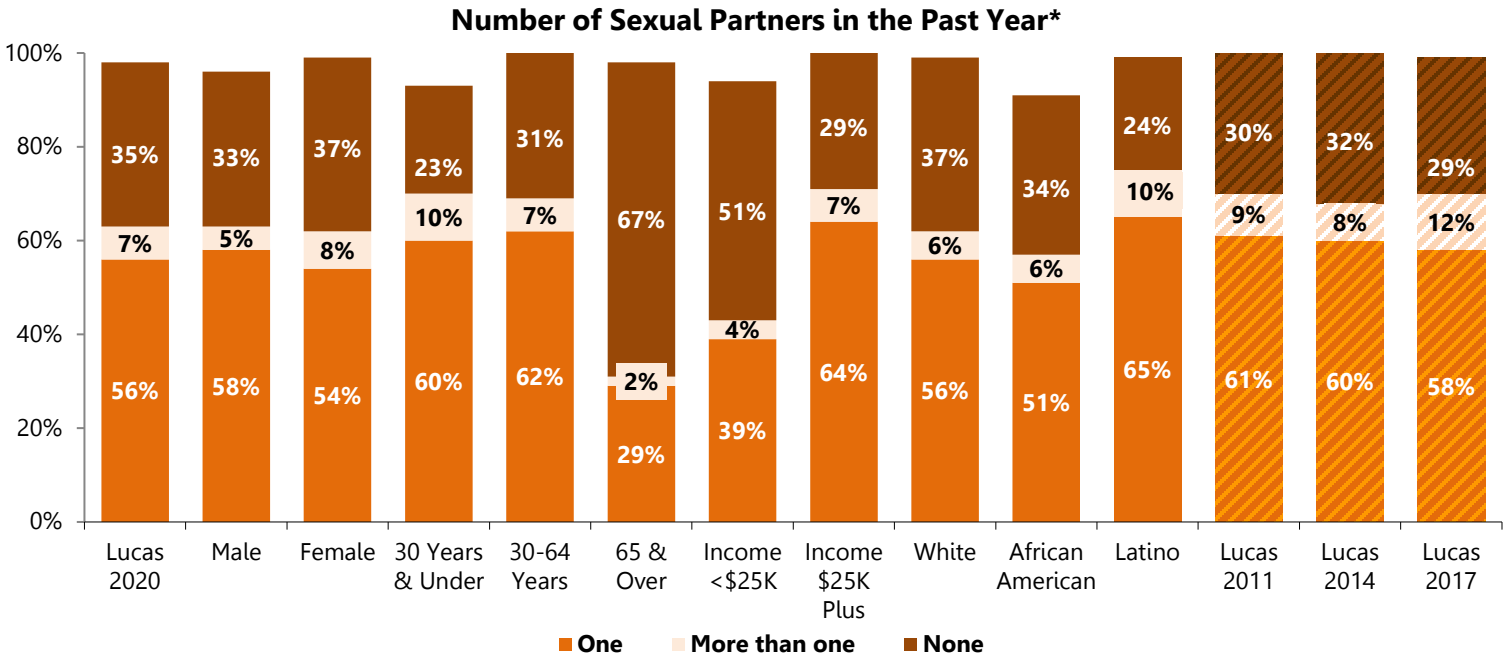
Adult Sexual Behavior

- Sixty-three percent (63%) of Lucas County adults had sexual intercourse in the past year.
- Seven percent (7%) of adults reported they had intercourse with more than one partner in the past year, increasing to 10% of those ages 30 and younger.
- Adults used the following methods of birth control: they or their partner is too old to get pregnant (23%); male or female condoms (14%); female sterilization (tubes tied) (11%); birth control pills, any kind (11%); they or their partner is infertile (7%); hysterectomy (7%); withdrawal (6%); IUD (e.g., Mirena) (5%); gay or lesbian (4%); practicing abstinence (4%); contraceptive ring (e.g., NuvaRing) (2%); diaphragm, cervical cap, or sponge (2%); having sex at certain times (rhythm or natural family planning) (2%); foam, jelly, film or cream (1%); emergency contraception (1%); had ovaries or testicles removed (1%); contraceptive implant (e.g., Nexplanon) (1%); copper-bearing IUD (e.g., ParaGard) (1%); shots (e.g., Depo-Provera) (1%); and contraceptive patch (e.g., Xulane) (<1%).
- Eleven percent (11%) of Lucas County adults were not using any method of birth control, 4% were pregnant and 4% were trying to get pregnant.
- The following situations applied to Lucas County adults: had sex without a condom in the past year (24%); had anal sex without a condom in the past year (6%); had sexual activity with someone of the same gender (4%); treated for a sexually transmitted disease (STD) in the past year (3%); had sex with someone they did not know (3%); had four or more sexual partners in the past year (2%); had sex with someone they met on social media (2%); engaged in sexual activity following alcohol or other drug use that they would not have done if sober (2%); tested positive for HPV (2%); tested positive for Hepatitis C (1%); were forced to have sex (1%); had unprotected sex because they could not afford birth control methods (<1%); injected any drug other than those prescribed (<1%); given/received food, drugs, shelter or money in exchange for sex in the past year (<1%); and tested positive for HIV (<1%).
- Nine percent (9%) of Lucas County adults were forced to have any sort of unwanted sexual activity, increasing to 13% of females and 16% of those with annual incomes less than $25,000. Sixteen percent (16%) of those who were forced to have sexual activity reported it.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Had more than one sexual partner in past year	10%	9%	8%	12%	7%	N/A	N/A

N/A – Not Available

The following graph shows the number of sexual partners Lucas County adults had in the past year. Examples of how to interpret the information include: 56% of all Lucas County adults had one sexual partner in the past year, 7% had more than one partner, and 35% did not have a sexual partner.



Respondents were asked: "During the past year, with how many different people have you had sexual intercourse?"
**Totals may not equal 100% as some respondents answered, "Don't know".*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey)

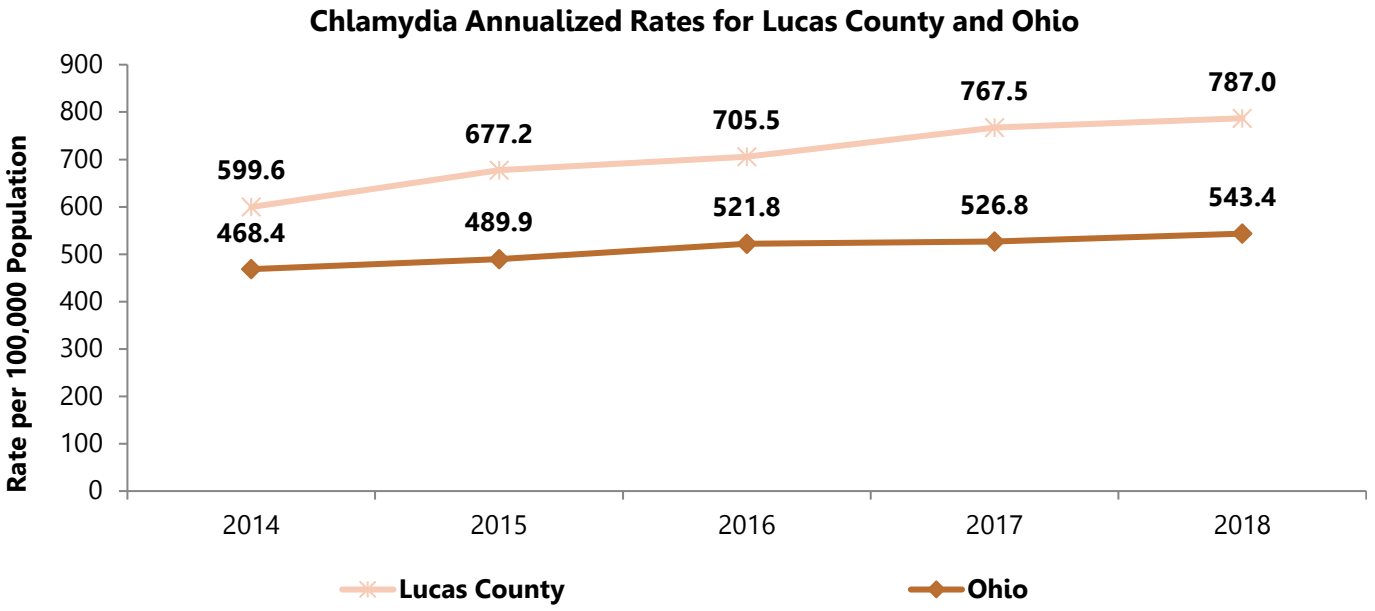
Scope of the Problem: Sexual Violence

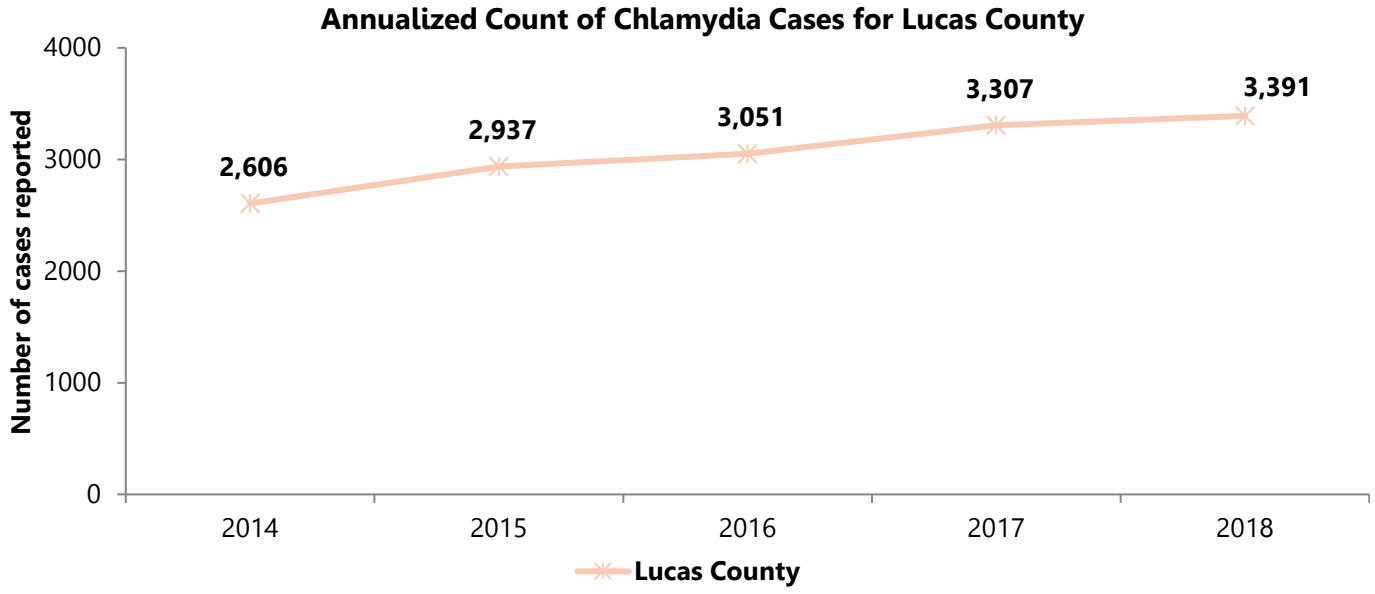
- 1 out of every 6 American women has been the victim of an attempted or completed rape in her lifetime (14.8% completed, 2.8% attempted).
- About 3% of American men—or 1 in 33—have experienced an attempted or completed rape in his lifetime.
- From 2009-2013, Child Protective Services agencies substantiated, or found strong evidence to indicate that, 63,000 children a year were victims of sexual abuse.
- Most child victims are 12-17: 34% of victims of sexual assault and rape are younger than age 12, and 66% of victims of sexual assault and rape are age 12-17.
- Every 73 seconds another American is sexually assaulted.
- The following number of people are victimized each year:
  - 321,500 Americans age 12 and older were sexually assaulted or raped
  - 80,600 inmates were sexually assaulted or raped
  - 60,000 children were victims of "substantiated or indicated" sexual abuse
  - 18,900 military personnel experienced unwanted sexual contact

(Source: RAINN, Scope of the Problem: Statistics, 2019)

The following graphs show Lucas County chlamydia infection rates per 100,000 population. The graphs show:

- Lucas County chlamydia rates increased from 2014 to 2018.
- The number of chlamydia cases in Lucas County increased from 2014 to 2018.

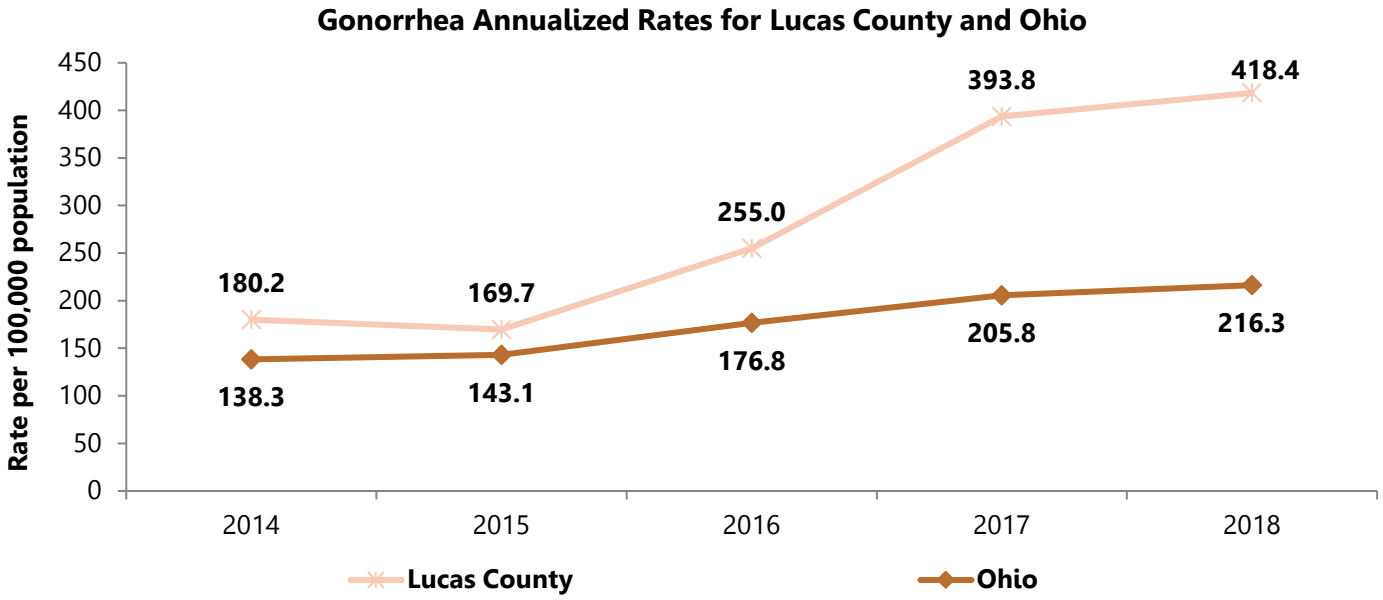


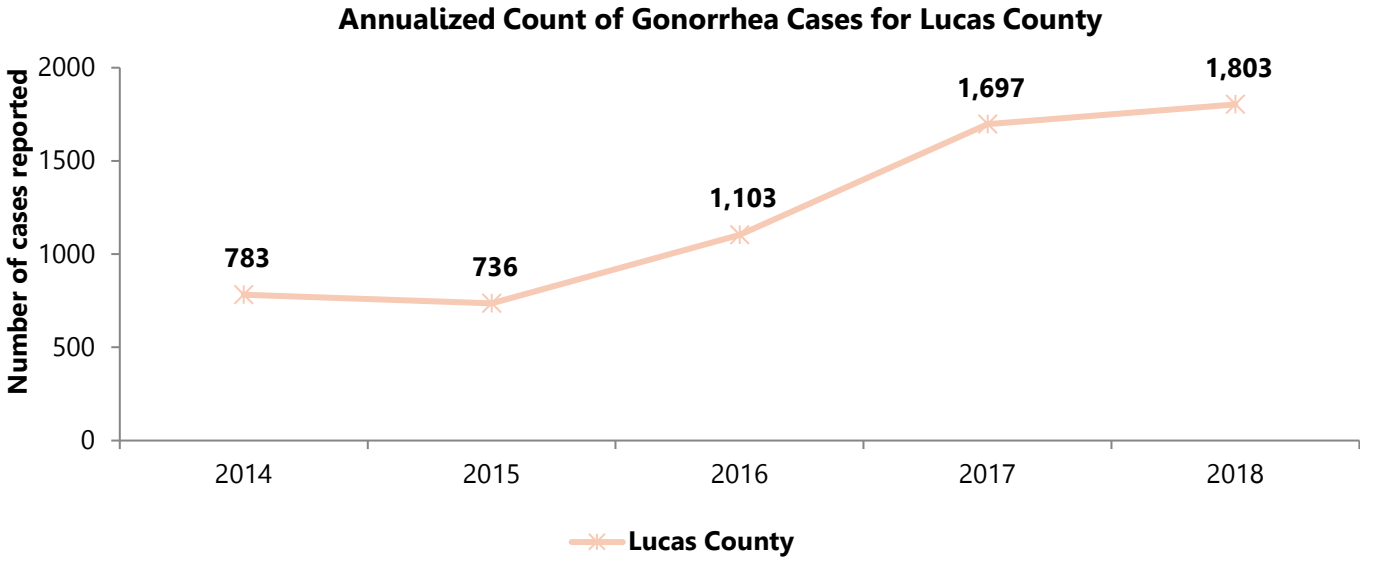


(Source: Ohio Department of Health, STD Surveillance Program, Data reported through 5/02/2019)

The following graphs show Lucas County gonorrhea infection rates per 100,000 population. The graphs show:

- Lucas County gonorrhea rates increased significantly between 2015 and 2018.
- Ohio gonorrhea rates steadily increased from 2014 to 2018.



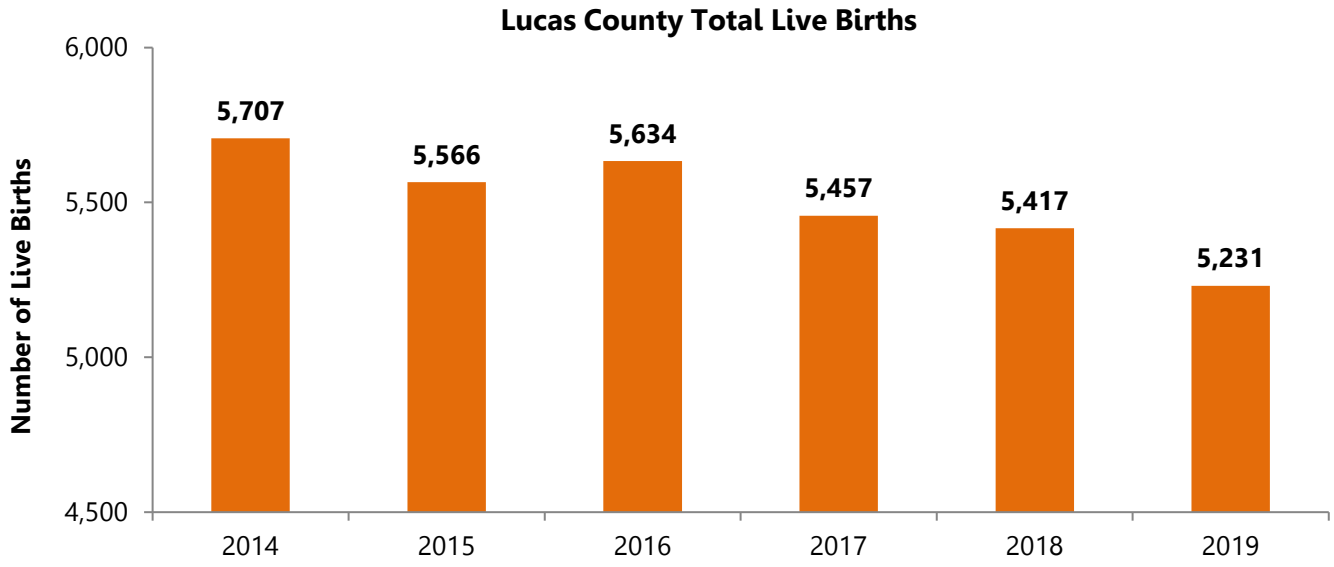


(Source for graphs: Ohio Department of Health, STD Surveillance Program, Data Reported through 5/2/19)

Pregnancy Outcomes

Note: Pregnancy outcome data includes all births to both adults and adolescents.

- From 2014 to 2019, there was an average of 5,502 live births per year in Lucas County.



(Source: Ohio Public Health Data Warehouse 2014-2018, Updated 8/16/2020)

Unintended Pregnancy

- The concept of unintended pregnancy helps in understanding the fertility of populations and the unmet need for contraception, also known as birth control, and family planning. Most unintended pregnancies result from not using contraception or from not using it consistently or correctly.
- Unintended pregnancy is associated with an increased risk of problems for the mom and baby. If the mom was not planning to get pregnant, she may have unhealthy behaviors or delay getting health care during the pregnancy, which could affect the health of the baby. Therefore, it is important for all women of reproductive age to adopt healthy behaviors such as:
    - Take folic acid
    - Maintain a healthy diet and weight
    - Be physically active regularly
    - Quit tobacco use
    - Refrain from excessive alcohol drinking
    - Abstain from alcohol if pregnant or planning to become pregnant
    - Take only medicines prescribed by your doctor
    - Talk to your health care provider about screening and proper management of chronic diseases
    - Visit your health care provider to receive recommended health care for your age, learn about possible health risks, and discuss if or when you are considering becoming pregnant
    - Use effective contraception correctly and consistently if you are sexually active but choose to delay or avoid pregnancy
- The United States set family planning goals in Healthy People 2020 to improve pregnancy planning and spacing, and to reduce the number of unintended pregnancies. Two ways to reach these goals are to increase:
    - Access to contraception that includes the full range of methods, such as long-acting, and reversible forms like intrauterine devices and hormonal implants
    - Correct and consistent use of contraception for sexually active women who choose to delay or avoid pregnancy

(Source: CDC, Reproductive Health, Unintended Pregnancy, Updated September 12, 2019)

Health Behaviors: Adult Mental Health

Key Findings

Five percent (5%) of Lucas County adults considered attempting suicide in the past year. Twenty-four percent (24%) of adults had a period of two or more weeks when they felt sad or hopeless nearly every day that they stopped doing usual activities in the past year.

5% of Lucas County adults, or approximately 16,336 adults seriously considered attempting suicide in the past year.

Adult Mental Health

- During the past year, Lucas County adults experienced the following almost every day for two weeks or more in a row: did not get enough sleep or rest (36%); had high stress (31%); felt worried, tense or anxious (30%); felt sad, blue or depressed (24%); stopped during some usual activities (14%); felt very healthy and full of energy (12%); and experienced an unusual increase or loss of appetite (11%).

- Five percent (5%) of Lucas County adults seriously considered attempting suicide in the past year.

- One percent (1%) of adults reported actually attempting suicide in the past year.

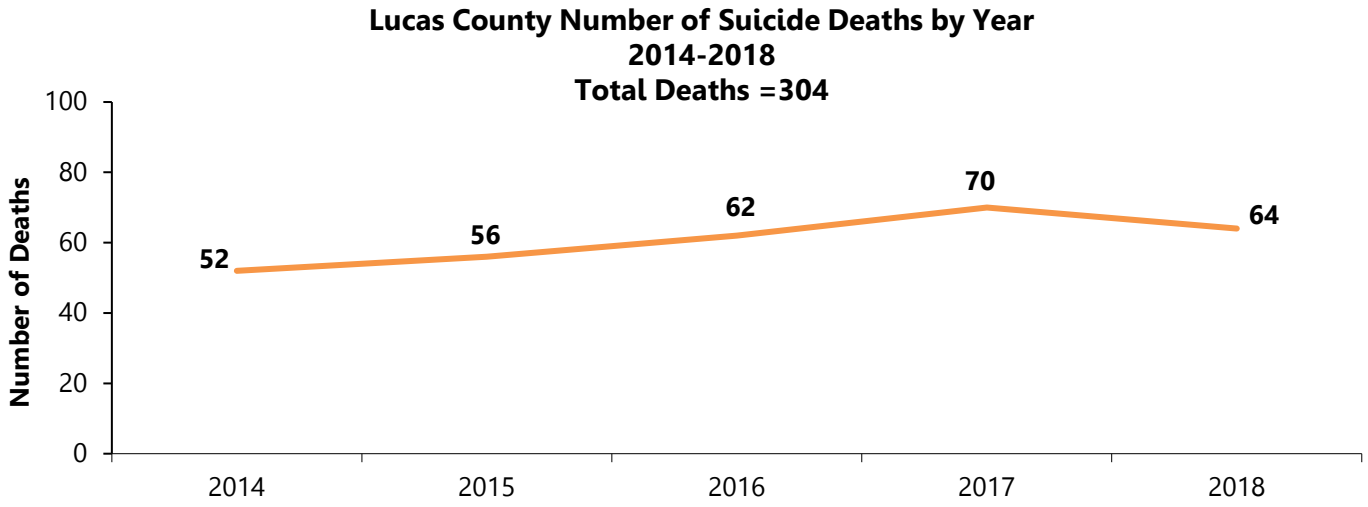
- Lucas County adults reported they or someone in their household were diagnosed with or treated for the following mental health issues in the past year:
  - Anxiety or emotional problems (26%)
  - Depression (25%)
  - Anxiety disorder (panic attacks, phobia, obsessive-compulsive disorder) (19%)
  - Attention deficit disorder (ADD/ADHD) (11%)
  - Bipolar disorder (6%)
  - Post-traumatic stress disorder (PTSD) (6%)
  - Alcohol and/or illicit drug abuse (5%)
  - Other trauma (5%)
  - Autism spectrum (4%)
  - Developmental disability (3%)
  - Eating disorder (3%)
  - Psychotic disorder (schizophrenia, schizoaffective disorder) (3%)
  - Life adjustment disorder (2%)
  - Gambling problem (1%)
  - Other mental health disorder (6%)

- Twenty-three percent (23%) of adults indicated they or someone in their household have taken medication for one or more mental health issues.

- Lucas County adults dealt with stress in the following ways: talked to someone they trust (48%), prayed/meditated (43%), listened to music (43%), exercised (41%), ate more or less than normal (39%), slept (35%), worked on a hobby (26%), worked (21%), drank alcohol (19%), smoked tobacco (10%), took it out on others (10%), used prescription drugs as prescribed (7%), called a professional (4%), used illegal drugs (3%), misused prescription drugs (1%), self-harmed (<1%), and other ways (12%).

- Sixteen percent (16%) of Lucas County adults had used a program or service for themselves or someone in their households to help with depression, anxiety, or emotional problems. The following prevented adults from using a program: had not thought of it (11%), did not know how to find a program (6%), other priorities (6%), could not afford to go (5%), co-pay/deductible too high (4%), fear (3%), stigma of seeking mental health services (3%), took too long to get in to see a doctor/health care provider (2%), could not find a mental health doctor or provider (2%), transportation (1%), could not get to the office or clinic (1%), and other reasons (4%). Fifty-six percent (56%) of adults indicated they did not need such a program.

The graph below shows the number of suicide deaths by year in Lucas County.



(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 3/27/20)
Note: Ohio Resident deaths include individuals that resided in Ohio at the time of death regardless of where the death occurred.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Considered attempting suicide in the past year	3%	3%	3%	2%	5%	N/A	N/A

N/A – Not Available

Suicide in the United States

Fatal Outcomes

- In 2018, suicide ranked as the 10th leading cause of death overall in the U.S. and ranked as the 2nd leading cause of death for those ages 15-34.
- In 2018, there was a total of 48,344 suicides, equating to an age-adjusted rate of 14.2 suicides per 100,000 people. Firearms accounted for half (50.5%) of these suicides, amounting to 24,432 suicides.
- On average, one person died due to suicide in the U.S. every 10.9 minutes.
- Males have a higher rate of fatal suicide, with 3.6 suicide deaths for every female death by suicide.

Non-Fatal Outcomes

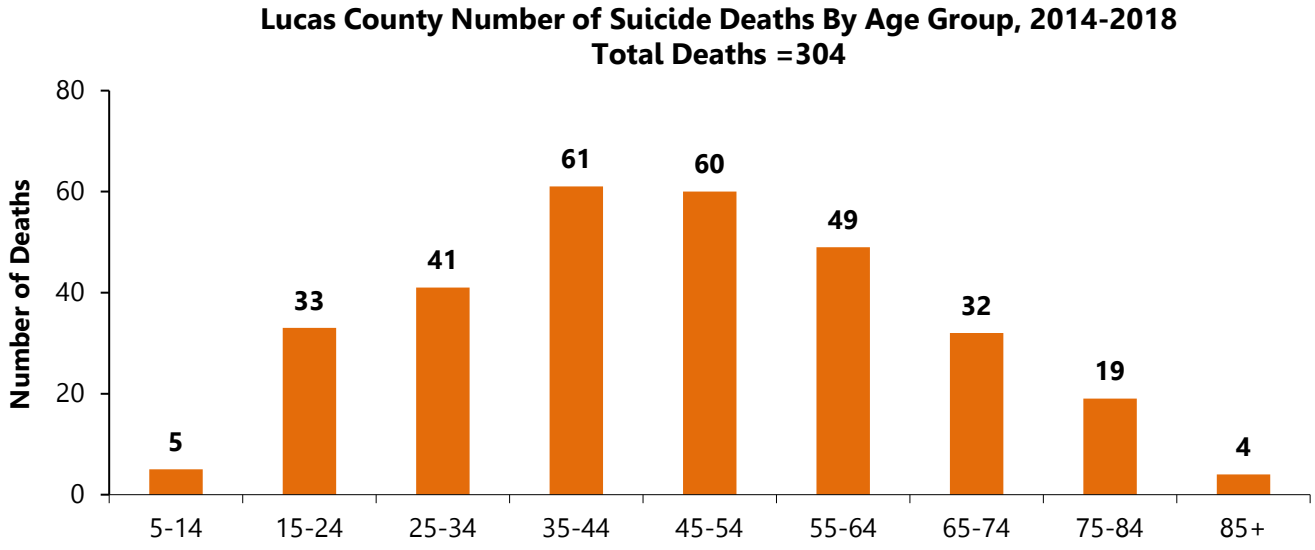
- In 2018, 1.2 million Americans attempted suicide. This equates to one suicide attempt every 26 seconds.
- Females have a higher rate of attempting suicide, with three females attempting suicide for every male who attempts suicide.

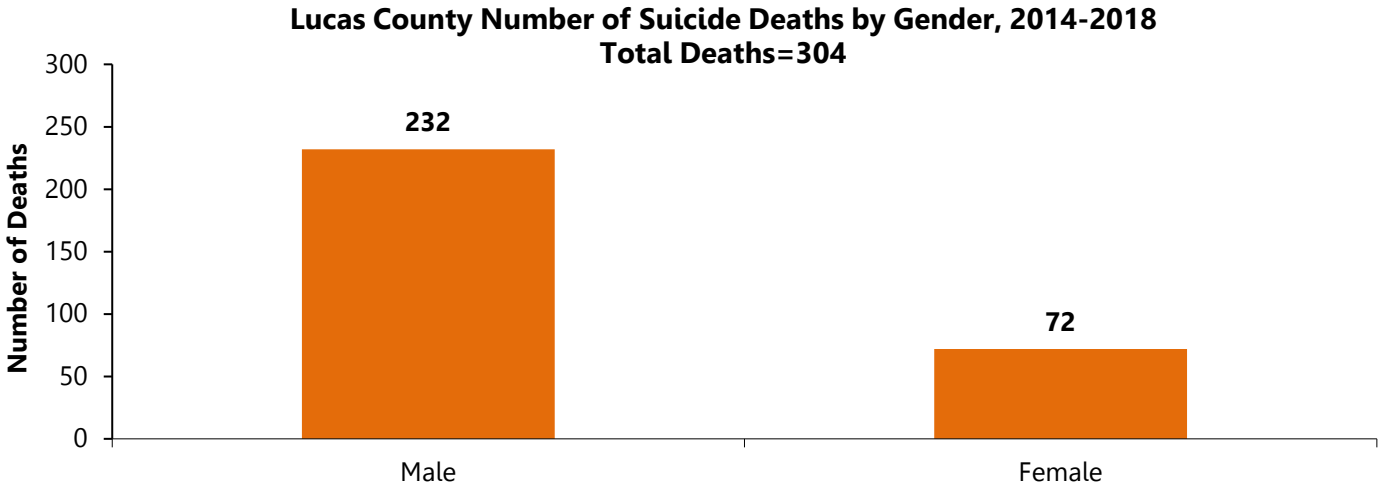
Survivors of Suicide Loss

- As much as 40-50% of the population have been exposed to suicide (those who knew someone personally who died by suicide) in their lifetime. The number of survivors of suicide loss in the U.S. is more than 5.4 million, or 1 out of every 61 Americans in 2018.

(Source: American Association of Suicidology, 2018 Facts and Statistics, Updated February 12, 2020)

The graphs below show the number of suicide deaths by age group and gender from 2014 to 2018 in Lucas County.

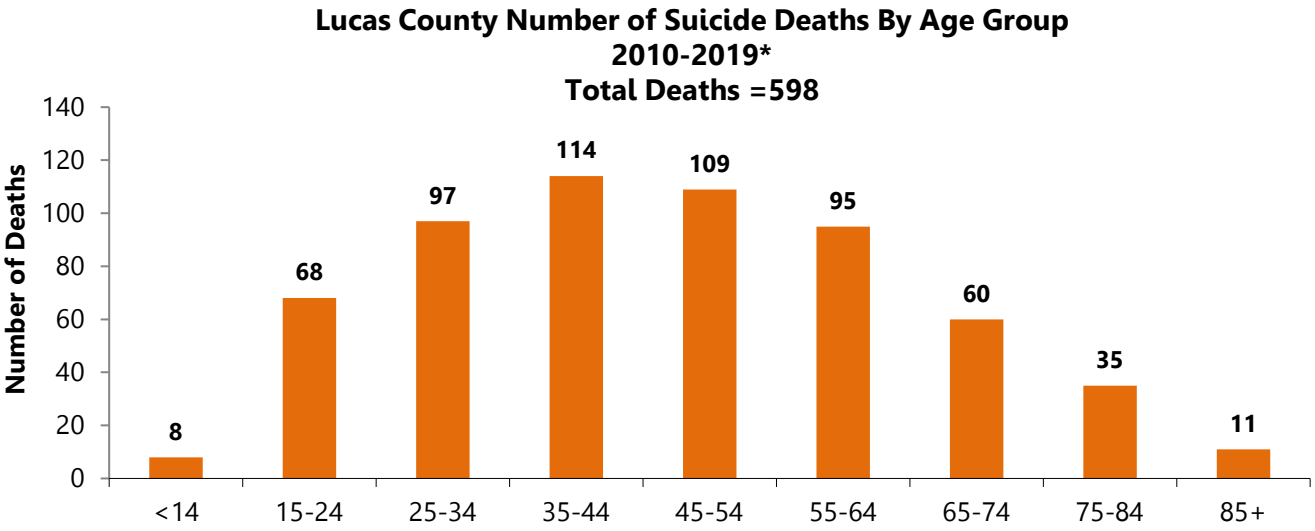




(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 3/27/20)
Note for graphs: Ohio Resident deaths include individuals that resided in Ohio at the time of death regardless of where the death occurred.

The graph below shows the number of suicide deaths by age group in Lucas County. The graph shows:

- From 2010 to 2019, 19% of all Lucas County suicide deaths occurred among residents ages 35 to 44.



Note: Ohio Resident deaths include individuals that resided in Ohio at the time of death regardless of where the death occurred.
**Data for 2019 are considered partial and may be incomplete and should be used with caution. One death had an age-range that was unknown.*
(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/29/2020)

Common Signs of Mental Illness in Adults

- Trying to tell the difference between what expected behaviors are and what might be the signs of a mental illness can be difficult. There's no easy test that can let someone know if there is mental illness or if actions and thoughts might be typical behaviors of a person or the result of a physical illness. Knowing the warning signs can help determine if someone needs to speak to a professional. For many people, getting an accurate diagnosis is the first step in a treatment plan.
- Each illness has its own symptoms, but common signs of mental illness in adults can include:
  - Excessive worrying or fear
  - Feeling excessively sad or low
  - Extreme mood changes
  - Avoiding friends and social activities
  - Changing in sleep habits or feeling tired and having low energy
  - Changes in eating habits such as increased hunger or lack of appetite
  - Abuse of substances like alcohol or drugs
  - Inability to carry out daily activities or handle daily problems and stress
- After diagnosis, a health care provider can help develop a treatment plan that could include medication, therapy or other lifestyle changes.
- Getting a diagnosis is just the first step; knowing your own preferences and goals are also important. Treatments for mental illness vary by diagnosis and by person. There's no "one size fits all" treatment. Treatment options can include medication, counseling (therapy), social support and education.

(Source: National Alliance on Mental Illness, Know the Warning Signs, 2018)

Chronic Disease: Cardiovascular Health

Key Findings

Four percent (4%) of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Thirty-nine percent (39%) had high blood pressure, 38% were obese, 27% had high blood cholesterol, and 15% were current smokers, which are four known risk factors for heart disease and stroke.

Lucas County
Leading Causes of Death
2016-2018

Total Deaths: 14,042

1. Heart Disease (25% of all deaths)
2. Cancer (21%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Ohio
Leading Causes of Death
2016-2018

Total Deaths: 367,518

1. Heart Disease (23% of all deaths)
2. Cancers (21%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Heart Disease and Stroke

- Four percent (4%) of adults reported they were diagnosed with angina.
- Sixty percent (60%) of those with angina were receiving treatment for the diagnosis.
- Four percent (4%) of adults reported they had a heart attack.
- Sixty-eight percent (68%) of those who had a heart attack reported currently receiving treatment for the diagnosis.
- Three percent (3%) of adults reported they had a stroke.
- Forty-three percent (43%) of those who had a stroke reported currently receiving treatment for the diagnosis.
- Six percent (6%) of adults reported they had heart disease, increasing to 14% of those older than the age of 65.
- More than four-fifths (84%) of adults with heart disease were receiving treatment for it.

4% of Lucas County adults or approximately 13,069 adults survived a heart attack or myocardial infarction.

High Blood Pressure (Hypertension)

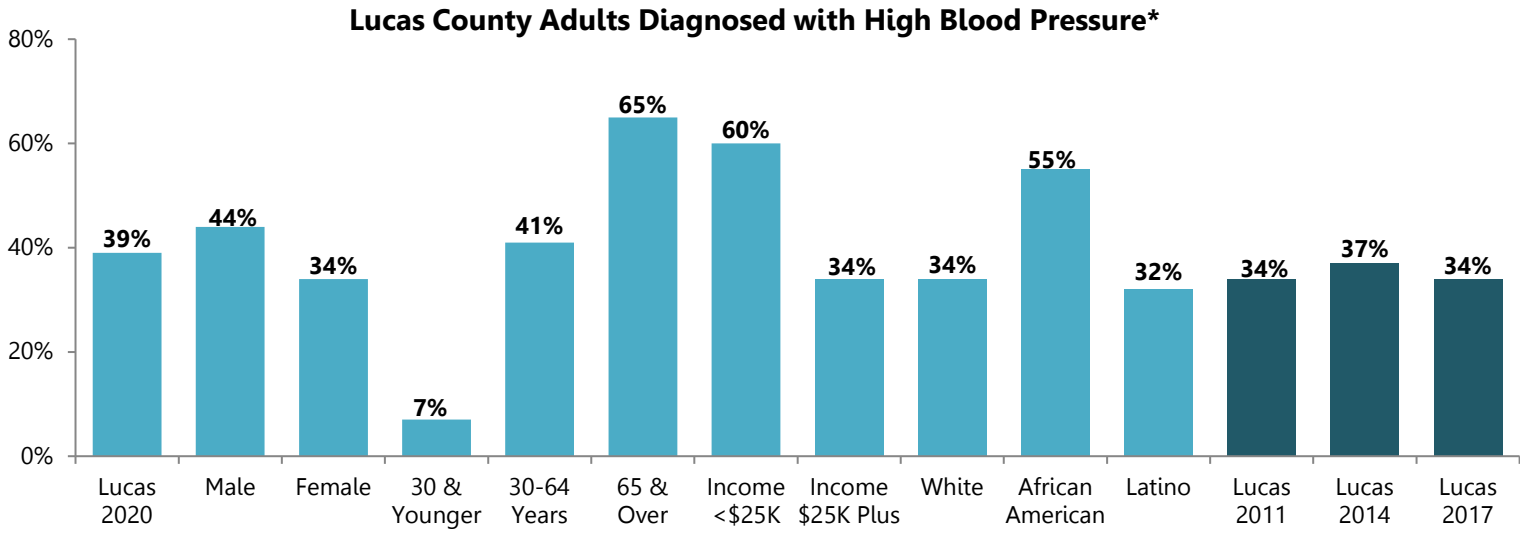
- Nearly two-fifths (39%) of adults had been diagnosed with high blood pressure. Ninety-one percent (91%) of adults reported they were currently receiving treatment for the diagnosis.
- Lucas County adults diagnosed with high blood pressure were more likely to have:
  - Been classified as overweight or obese by body mass index (BMI) (87%)
  - Been ages 65 years or older (65%)
  - Annual incomes less than $25,000 (60%)

High Blood Cholesterol

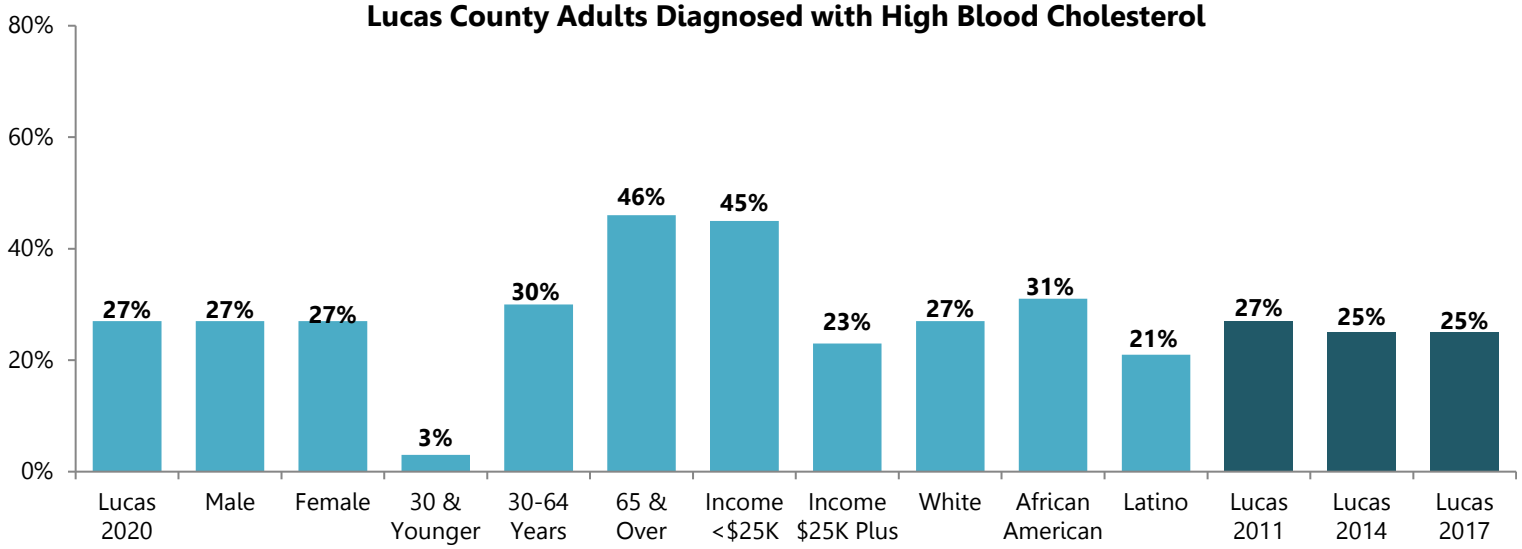
- More than one-fourth (27%) of adults had been diagnosed with high blood cholesterol. Eighty percent (80%) of adults reported they were currently receiving treatment for the diagnosis.
- More than three-quarters (81%) of adults had their blood cholesterol checked within the past five years.
- Lucas County adults with high blood cholesterol were more likely to:
  - Have been classified as overweight or obese by body mass index (BMI) (83%)

- Have been ages 65 years or older (46%)
- Annual incomes less than $25,000 (45%)

The following graphs show the number of Lucas County adults who have been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 39% of all Lucas County adults have been diagnosed with high blood pressure, including 44% of males, 34% of females, and 65% of those 65 years and older.

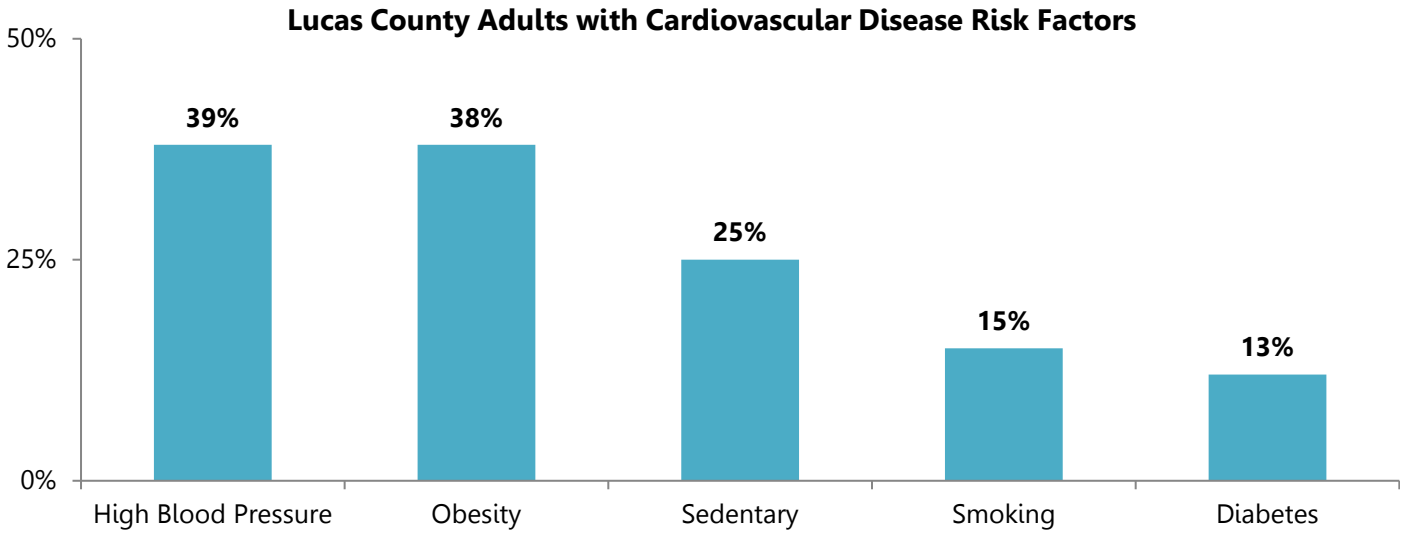


**Does not include respondents who indicated high blood pressure during pregnancy only.*



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph demonstrates the percentage of Lucas County adults who had major risk factors for developing cardiovascular disease (CVD).

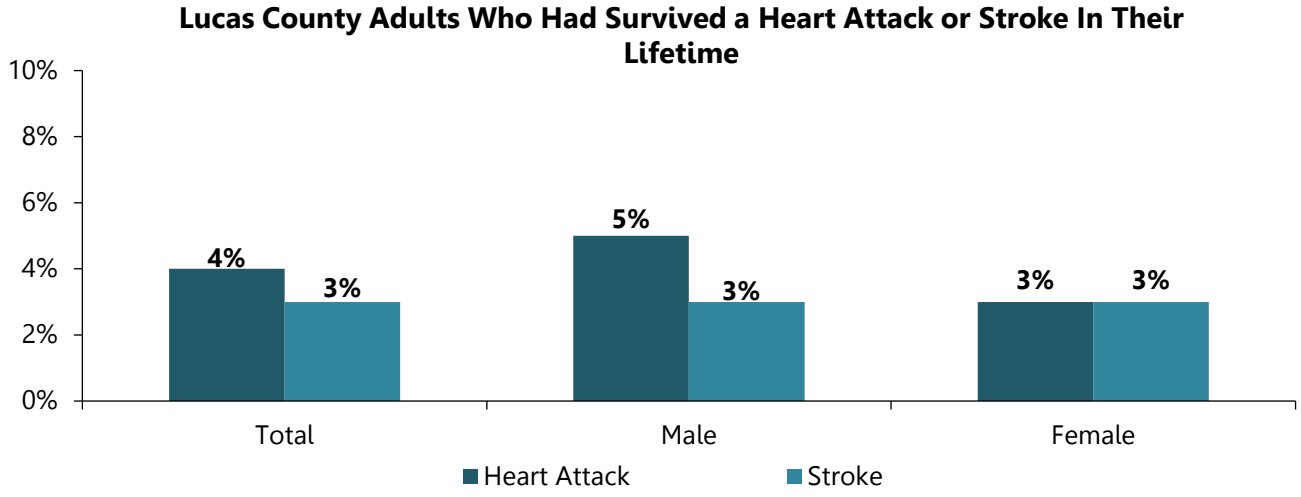


Healthy People 2020 Objectives
Heart Disease and Stroke (HDS)

Objective	2020 Lucas Survey Population Baseline	2017 U.S. Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	39%	35% Adults age 18 and older	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	81%	85% Adults age 18 and older	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	27%	33% Adults age 20+ with TBC>240 mg/dl	14%

Note: All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020, 2017 BRFSS, 2019/2020 Lucas County Health Assessment)

The following graph shows the percentage of Lucas County adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 5% of Lucas County males survived a heart attack compared to 3% of females.



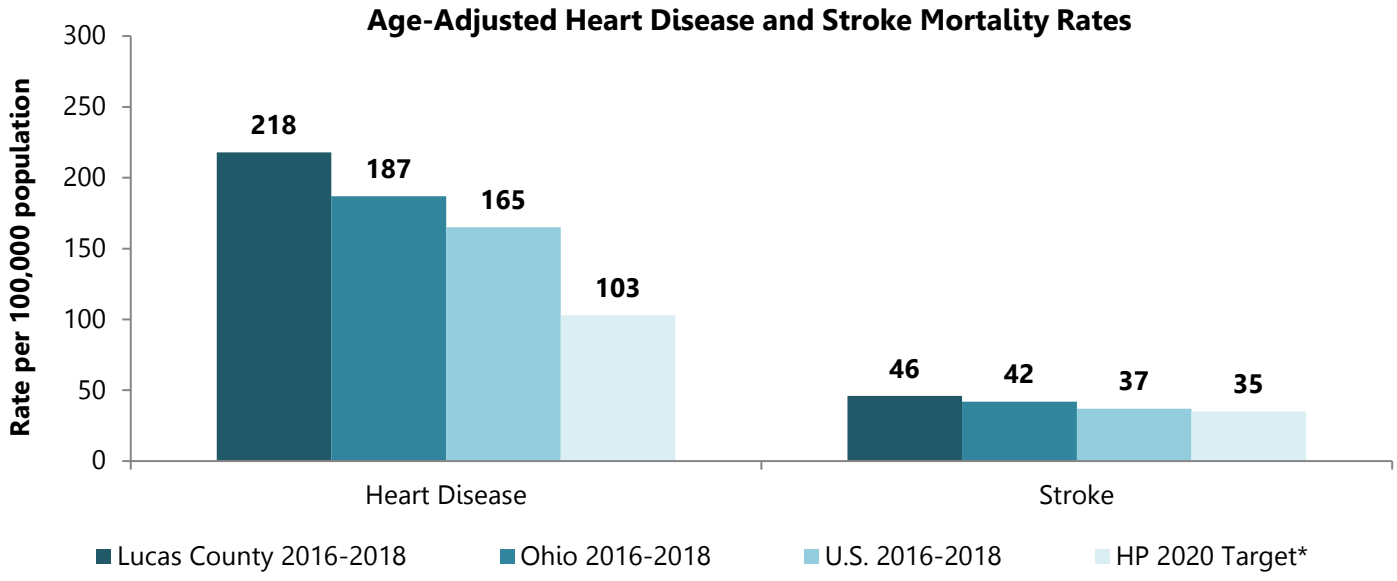
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Had angina	7%	3%	5%	2%	4%	5%	4%
Had a heart attack	N/A	3%	5%	5%	4%	5%	4%
Had a stroke	N/A	2%	3%	3%	3%	4%	3%
Had been diagnosed with high blood pressure	35%	34%	37%	34%	39%	35%	32%
Had been diagnosed with high blood cholesterol	34%	27%	25%	25%	27%	33%	33%
Had their blood cholesterol checked within the last five years	72%	76%	80%	77%	81%	85%	87%

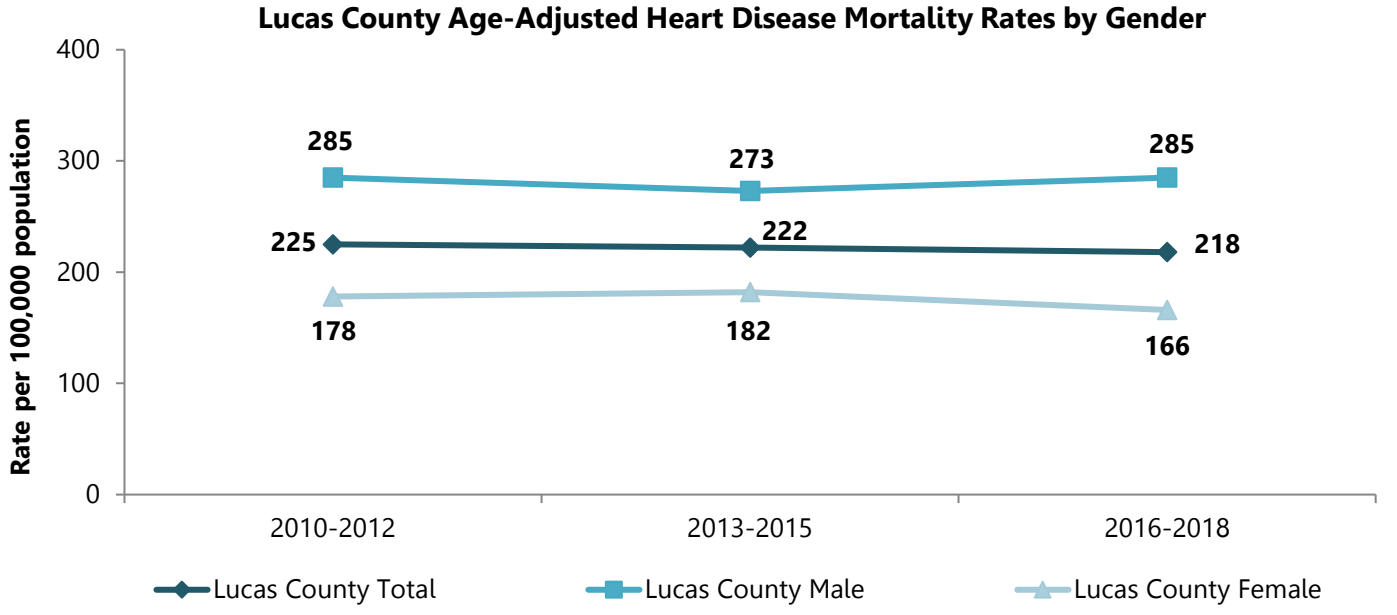
N/A – Not Available

The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- When age differences are accounted for, the statistics indicate that the Lucas County heart disease mortality rate was higher than the figures for the state, the U.S., and the Healthy People 2020 target from 2016 to 2018.
- The 2016 to 2018 Lucas County age-adjusted stroke mortality rate was higher than the figures for the state, the U.S., and the Healthy People 2020 target.
- From 2010 to 2018, Lucas County female and male age-adjusted heart disease mortality rates fluctuated.



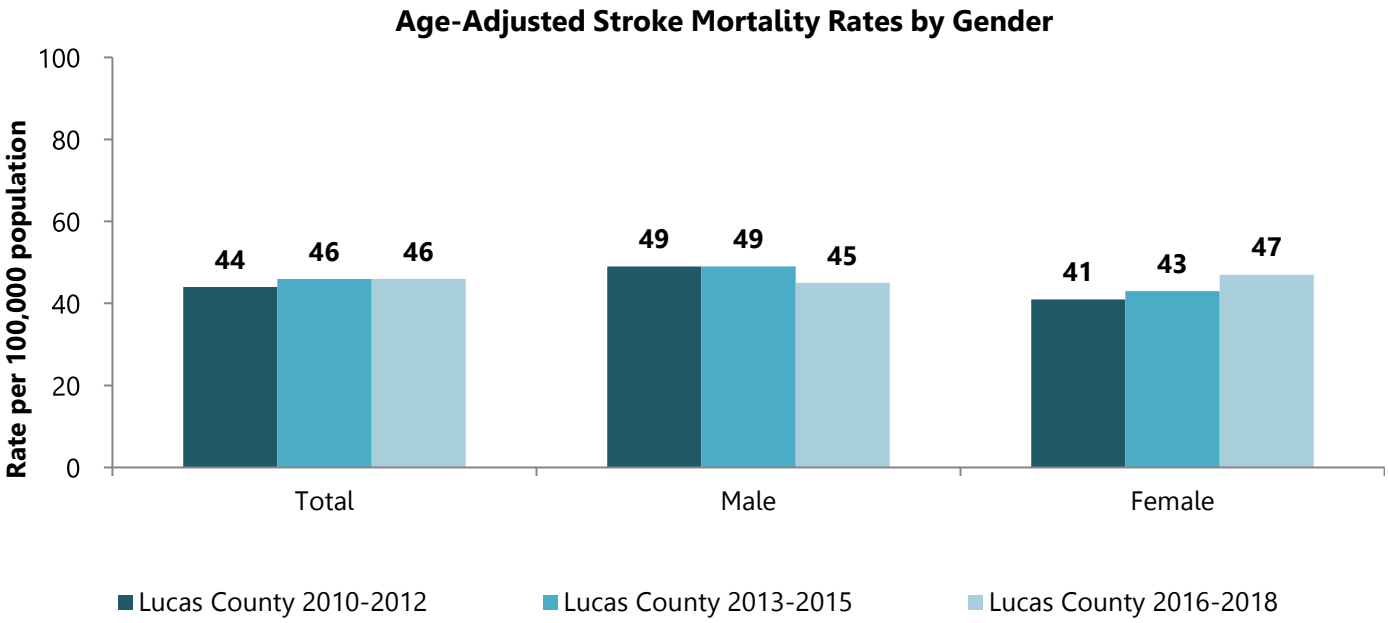
**The Healthy People 2020 Target objective for coronary heart disease is reported for heart attack mortality.*
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2015-2017, Healthy People 2020)



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for stroke by gender.

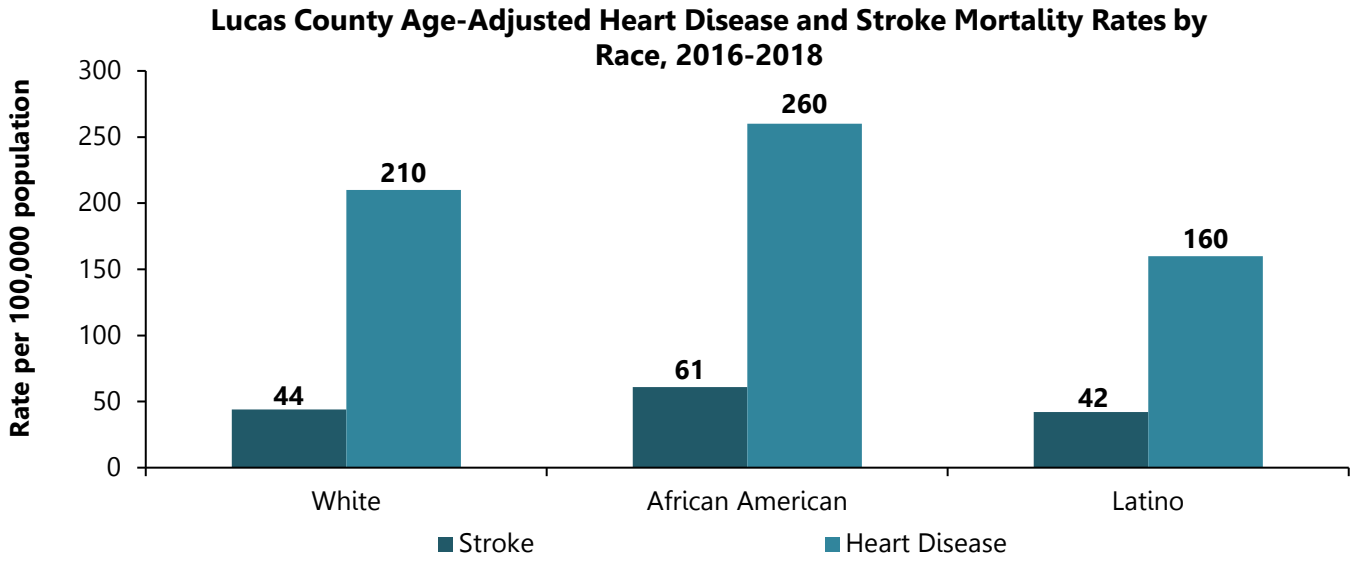
- From 2010 to 2018, the Lucas County stroke mortality rate stayed relatively stable.



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by race. The graph shows:

- From 2016 to 2018, the age-adjusted stroke and heart disease mortality rates were higher in the African American population than in the white and Latino populations.



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 3/27/20)

Chronic Disease: Cancer

Key Findings

In 2020, 12% of Lucas County adults were been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (2,980) of all (14,042) Lucas County resident deaths.

Lucas County
Incidence of Cancer, 2013-2017

All Types: 11,959 cases

- Lung and Bronchus: 1,729 cases (14%)
- Breast: 1,679 cases (14%)
- Prostate: 1,468 cases (12%)
- Colon and Rectum: 1,097 cases (9%)

In 2016-2018, there were 2,980 cancer deaths in Lucas County.

(Source: Ohio Cancer Incidence Surveillance System, Ohio Public Health Data Warehouse, 2013-2017)

Adult Cancer

- Twelve percent (12%) of Lucas County adults were diagnosed with cancer at some point in their lifetime, increasing to 29% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: breast (29%), other skin cancer (20%), prostate (9%), melanoma (7%), cervical (6%), bladder (5%), leukemia (3%), endometrial (3%), colon (3%), renal (3%), lung (3%), head and neck (1%), esophageal (1%), bone (1%), non-Hodgkin's lymphoma (1%), and other types of cancer (13%). Nine percent (9%) of adults were diagnosed with multiple types of cancer.
- Lucas County adults reported receiving the following cancer screenings:
  - Colorectal cancer in the past five years (26%)
  - Oral cancer in the past year (16%)
  - Skin cancer in the past year (15%)
  - Lung cancer in the past three years (4%)

12% of Lucas County adults, or approximately 39,206 adults were diagnosed with cancer at some point in their lifetime.

Cancer Facts

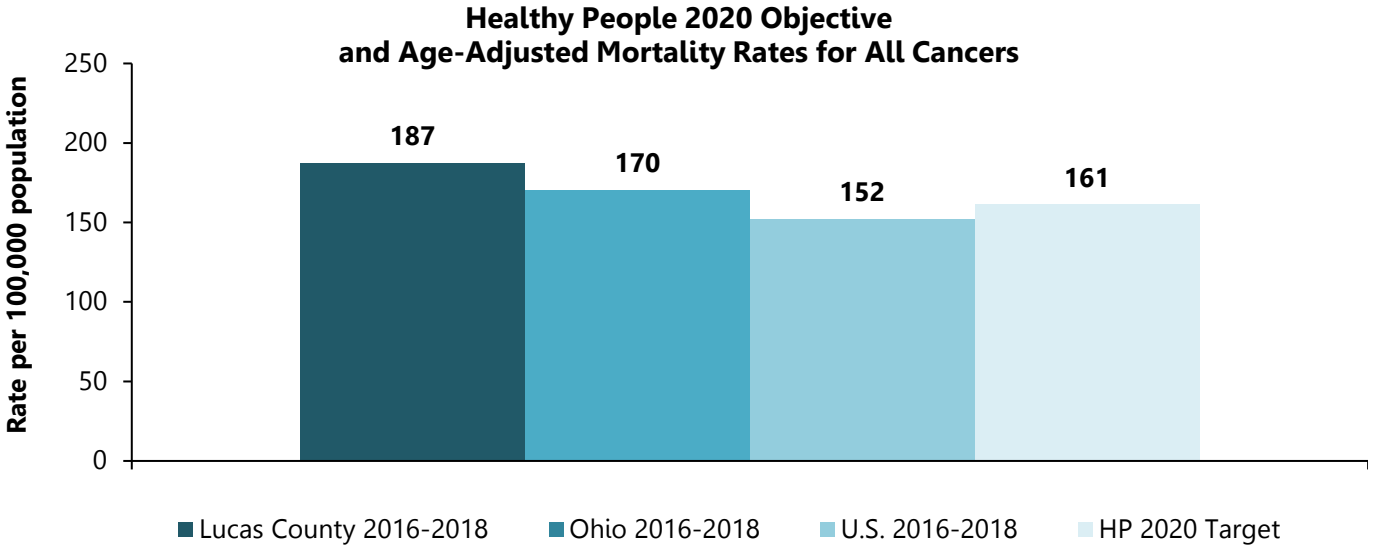
- The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (2,980) of all (14,042) Lucas County resident deaths *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- The American Cancer Society states that about 606,520 Americans are expected to die of cancer in 2019. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease *(Source: American Cancer Society, Facts & Figures 2020).*

Cancer Fast Facts

- Cancer is the second leading cause of death in the United States, but many kinds of cancer can be prevented or caught early.
- Leading risk factors for preventable cancers are smoking, getting too much UV radiation from the sun or tanning beds, being overweight or obese, and drinking too much alcohol.
- Some kinds of cancer (like breast, cervical, and colorectal) can be caught early through screening. Other kinds of cancer can be prevented. For example, cervical cancer through vaccination and colorectal cancer can be prevented through removing precancerous growths in the colon and rectum.
- The cost of cancer care in the United States is expected to reach almost $174 billion by 2020.

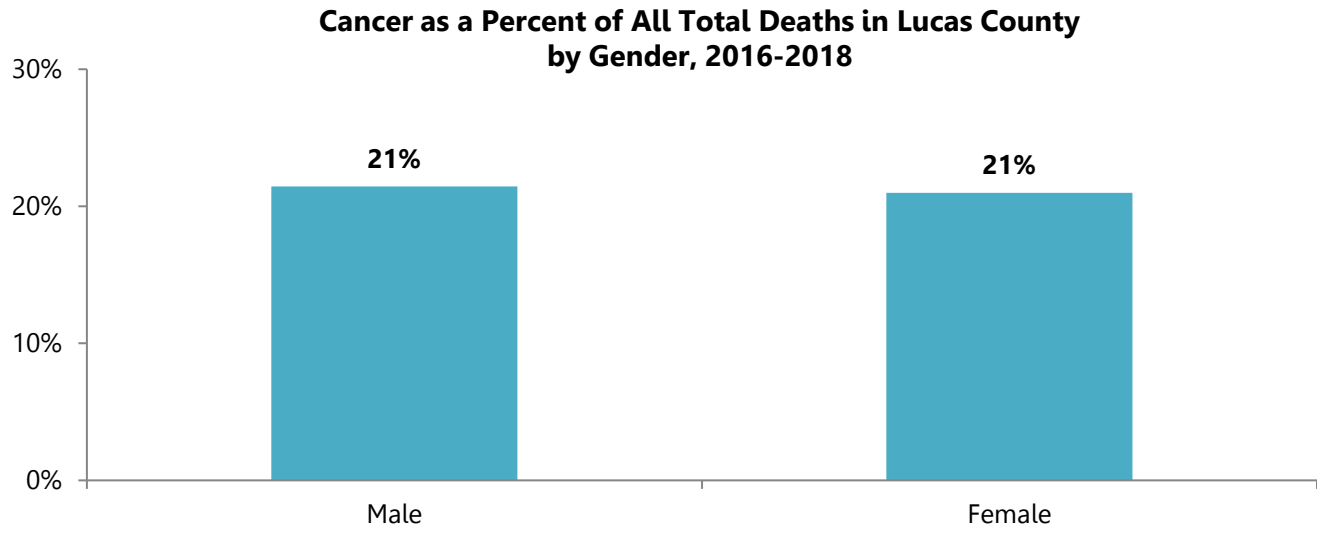
(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Cancer, Updated April 15, 2020)

The following graph shows the Lucas County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population) for all types of cancer in comparison to the Healthy People 2020 objective.



(Source: Ohio Public Health Data Warehouse, CDC Wonder, Healthy People 2020)

The following graph shows cancer as a percent of total deaths in Lucas County.

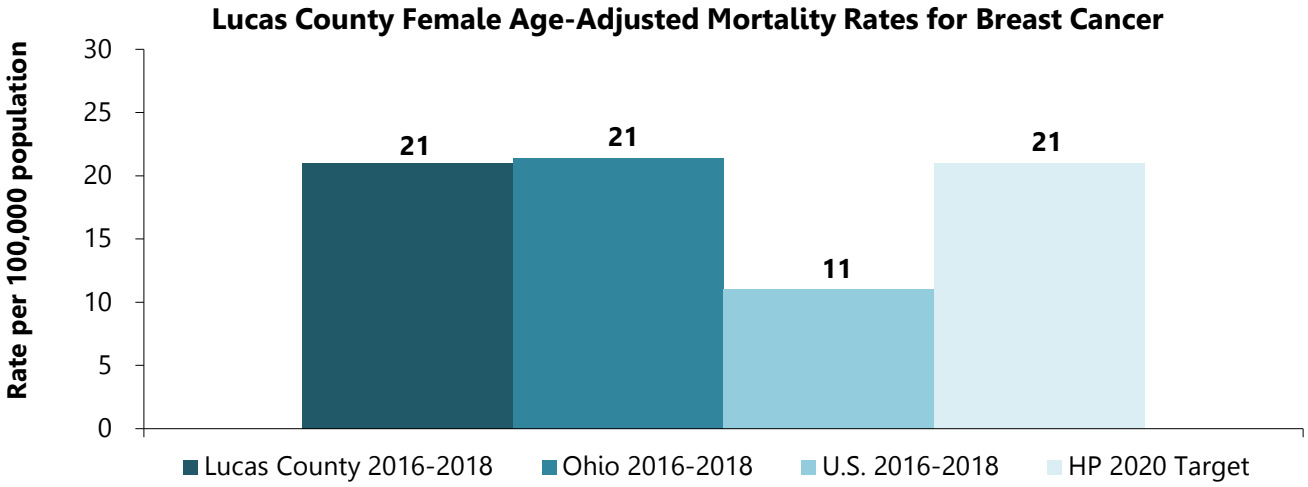


(Source: Ohio Public Health Data Warehouse, 2016-2018)

Breast Cancer

- In 2020, 55% of Lucas County females reported having a clinical breast examination in the past year.
- More than half (58%) of Lucas County females older than the age of 40 had a mammogram in the past year.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommend that those 40 to 44 years of age have the option to begin annual mammography, those 45 to 54 should undergo annual mammography, and those 55 years of age and older may transition to biennial mammography or continue annual mammography. Women should continue mammography as long as overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual magnetic resonance imaging (MRI) is recommended in addition to mammography, typically starting at age 30 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for breast cancer in comparison with the Healthy People 2020 objective.

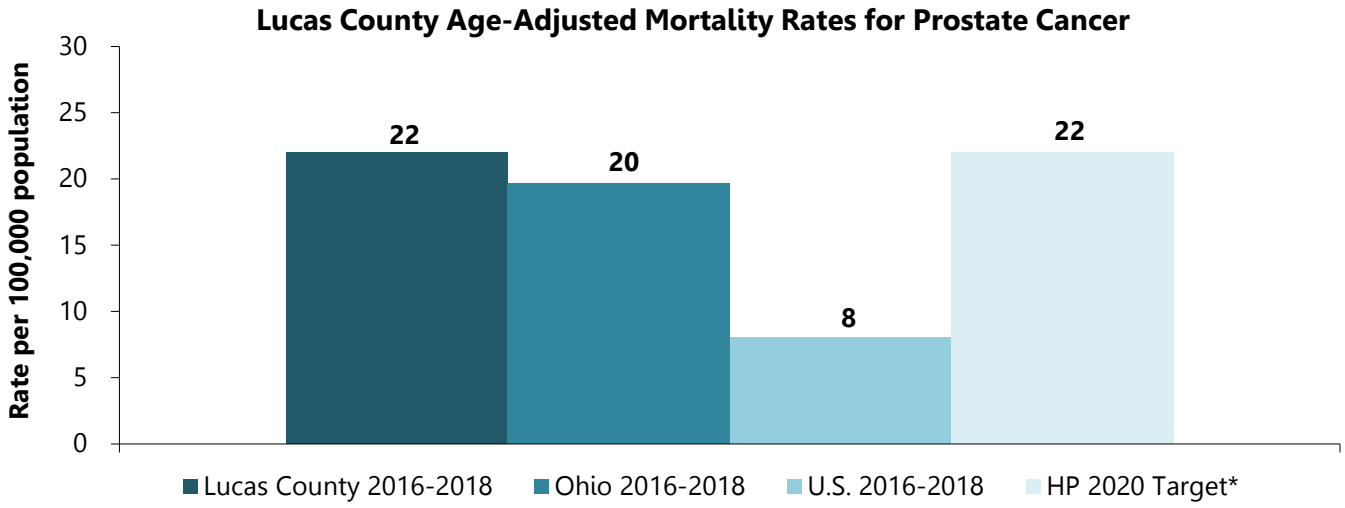


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

Prostate Cancer

- Nearly half (48%) of Lucas County men had a digital rectal exam in their lifetime, and 12% had one in the past year.
- ODH statistics indicate that prostate cancer accounted for 9% of all male cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- No organizations presently endorse routine prostate cancer screening for men at average risk because of concerns about the high rate of overdiagnosis (detecting disease that would never have caused symptoms or harm), along with the significant potential for serious side effects associated with prostate cancer treatment. The American Cancer Society recommends that beginning at age 50, men who are at average risk of prostate cancer and have a life expectancy of at least 10 years have a conversation with their health care provider about the benefits and limitations of PSA testing and make an informed decision about whether to be tested based on their personal values and preferences. Men at high risk of developing prostate cancer (Black men or those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at age 40 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for prostate cancer in comparison with the Healthy People 2020 objective.

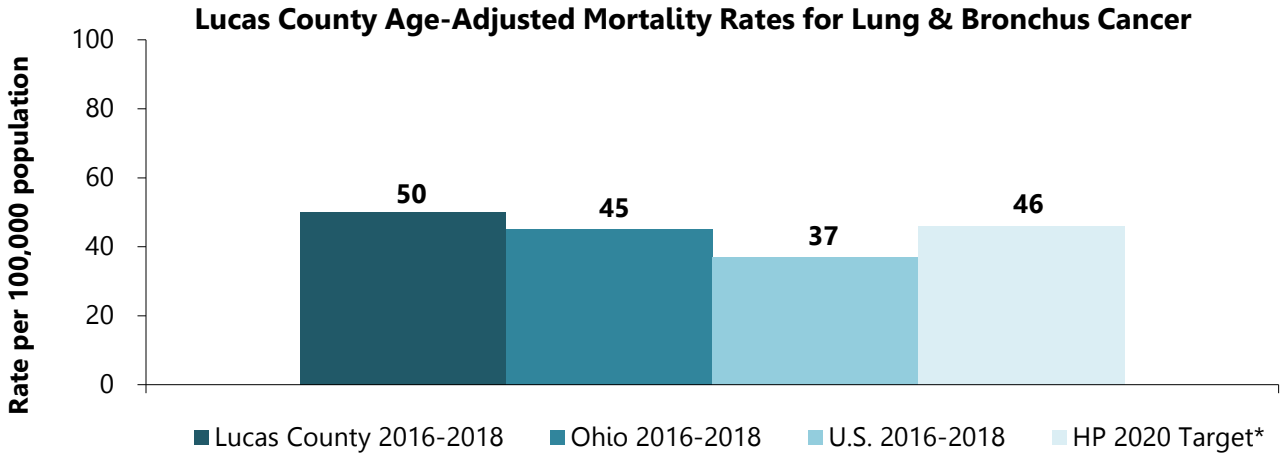


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

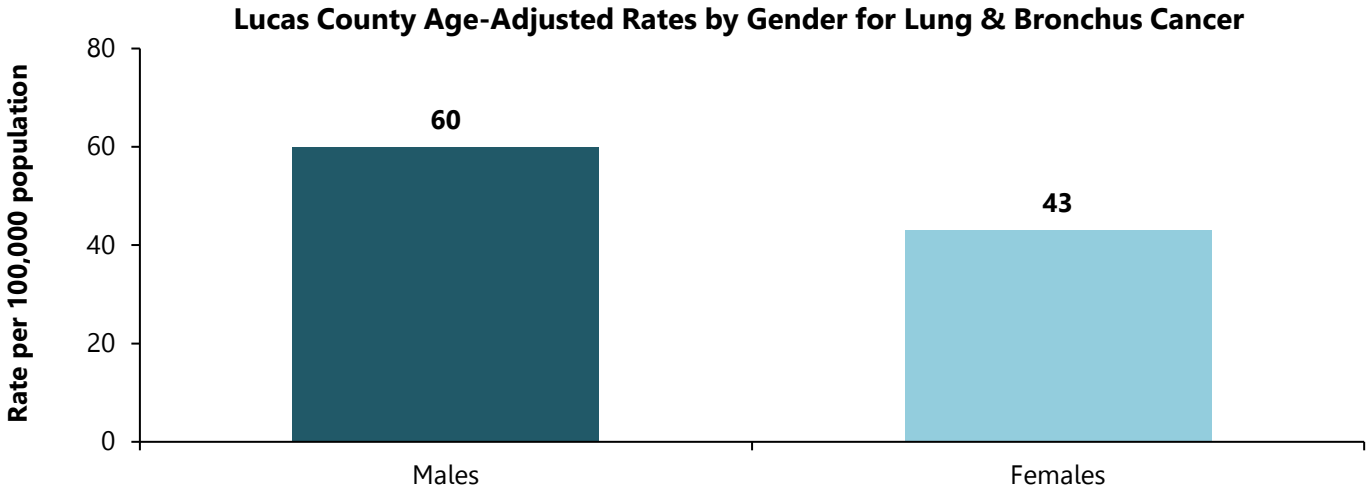
Lung Cancer

- In Lucas County, 15% of male adults were current smokers and 25% were former smokers.
- ODH reports that lung and bronchus cancer (total deaths=802) was the leading cause of male cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- ODH reports that lung and bronchus cancer was the leading cause of female cancer deaths (total deaths=387) in Lucas County from 2016 to 2018, followed by breast (total deaths=184) and colorectal cancers (total deaths=142) *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for lung and bronchus cancer in comparison with the Healthy People 2020 objective, as well as by gender.



**Healthy People 2020 Target data is for lung cancer only*
(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

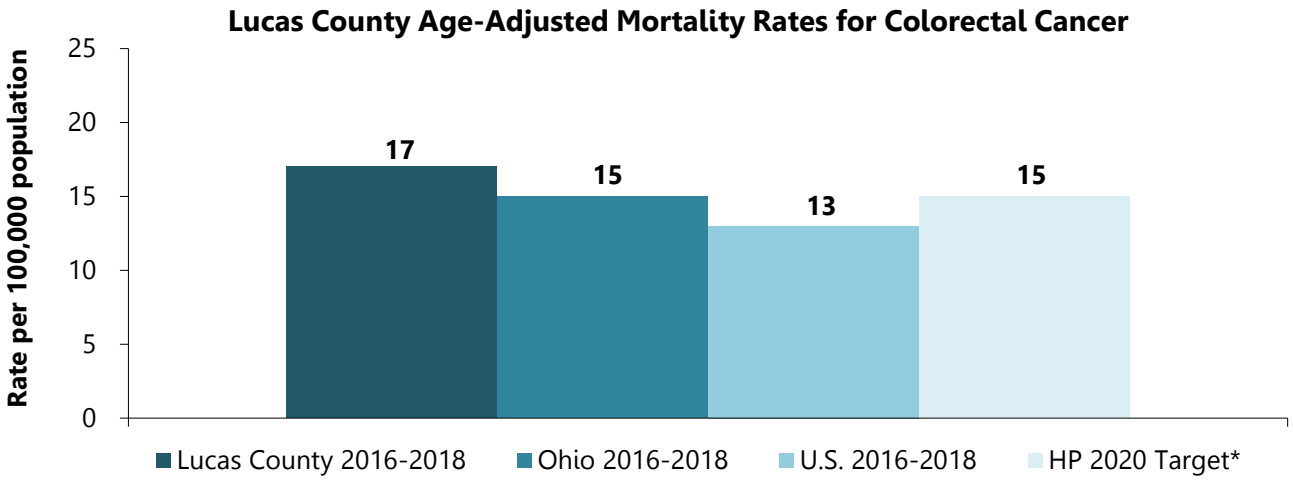


(Source: Ohio Public Health Data Warehouse 2016-2018)

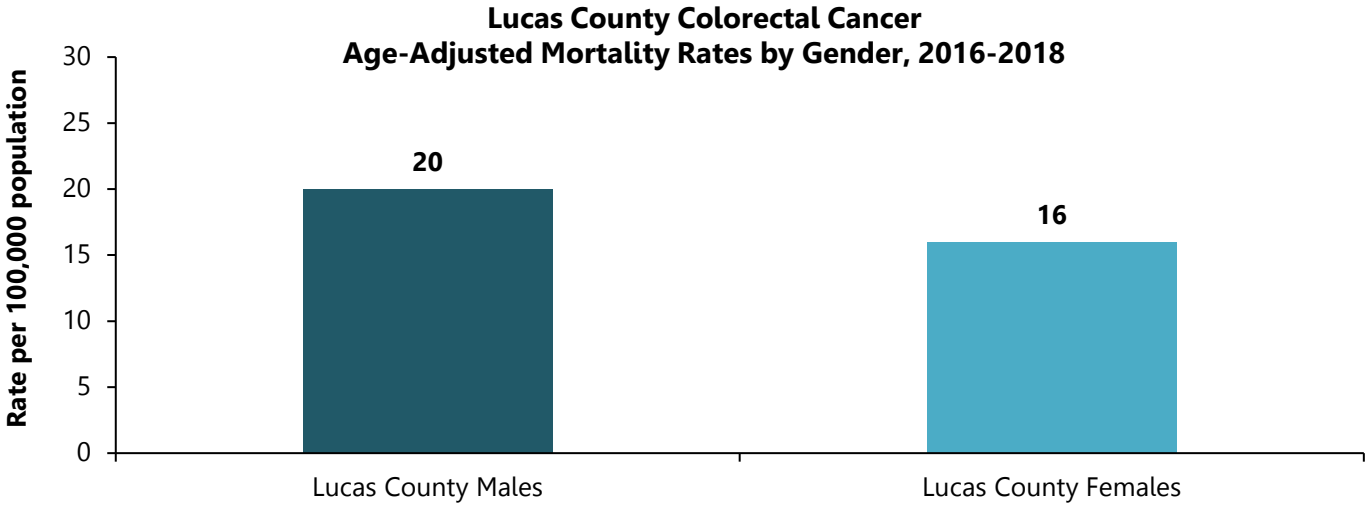
Colorectal Cancer

- ODH indicates that colorectal cancer accounted for 9% of all male and 10% of female cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- Modifiable factors that increase colorectal cancer risk include obesity, physical inactivity, long-term smoking, high consumption of red or processed meat, low calcium intake, moderate to heavy alcohol consumption, and very low intake of fruits and vegetables and whole-grain fiber. Hereditary and medical factors that increase risk include a personal or family history of colorectal cancer and/or polyps, certain inherited genetic conditions, a personal history of chronic inflammatory bowel disease, and type 2 diabetes *(Source: American Cancer Society, Facts & Figures 2020).*
- Screening can prevent colorectal cancer through the detection and removal or precancerous growths, as well as detect cancer at an early stage. Regular screenings with either stool tests or exams (e.g., colonoscopy) results in a reduction in premature colorectal cancer death. New guidelines from the American Cancer Society recommend men and women at average risk for colorectal cancer be screened starting at age 45 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for colorectal cancer in comparison with the Healthy People 2020 objective, as well as by gender.



(Source: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018`)



(Source: Ohio Public Health Data Warehouse 2016-2018)

Lucas County Incidence of Cancer, 2013-2017

Types of Cancer	Age-Adjusted Rate	Number of Cases
Lung and Bronchus	66.6	1,729
Breast	67.0	1,679
Prostate	67.0	1,679
Colorectal	114.8	1,468
Other Sites/Types	33.9	857
Bladder	22.7	583
Melanoma of Skin	21.4	535
Non-Hodgkins Lymphoma	18.3	461
Uterus	29.6	433
Kidney & Renal Pelvis	16.4	419
Pancreas	14.9	388
Oral Cavity & Pharynx	12.4	335
Thyroid	13.8	303
Leukemia	11.2	278
Liver & Intrahepatic Bile Duct	7.4	205
Stomach	7.4	185
Brain and Other CNS	7.4	176
Multiple Myeloma	6.9	175
Ovary	12.2	165
Esophagus	6.1	161
Larynx	4.2	110
Cervix	8.4	96
Hodgkins Lymphoma	3.3	73
Testis	4.8	48
Total		11,959

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 2/7/2020)

2020 Cancer Estimates

- In 2020, more than 1.8 million new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about 18% of the new cancer cases expected to occur in the U.S. in 2020 will be related to being overweight or obsity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 606,520 Americans are expected to die of cancer in 2020.
- 80% of lung cancer deaths in the U.S are attributed to smoking.
- In 2019, estimates predicted that there will be 71,850 new cases of cancer and 25,380 cancer deaths in Ohio.
- Of the new cancer cases in Ohio, approximately 10,110 (14%) will be from lung and bronchus cancers and 4,100 (6%) will be from melanoma (skin) cancer.
- About 10,350 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 7,030 (10%).

(Source: American Cancer Society, Facts and Figures 2020)

Chronic Disease: Arthritis

Key Findings

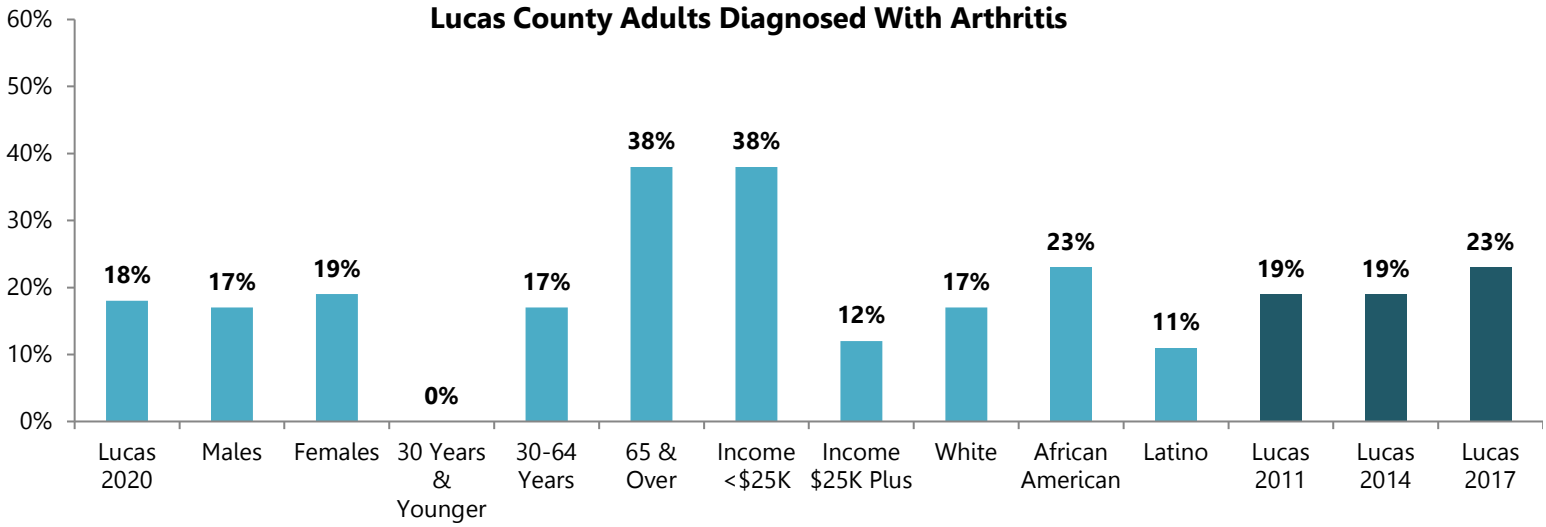
Eighteen percent (18%) of Lucas County adults were diagnosed with arthritis.

Arthritis

- Eighteen percent (18%) of Lucas County adults were diagnosed with arthritis, increasing to 38% of those older than the age of 65.
- Sixty-six percent (66%) of adults with arthritis were currently receiving treatment for their diagnosis.

18% of Lucas County adults, or approximately 58,809 adults were diagnosed with arthritis.

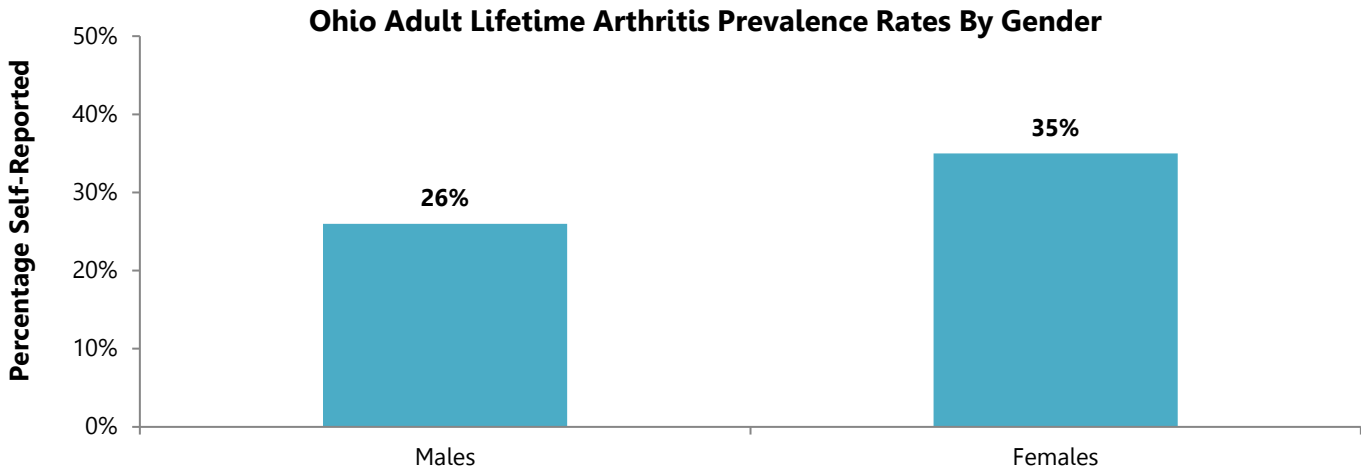
The following graph shows the percentage of Lucas County adults who were told by a doctor they had arthritis. An example of how to interpret the information includes: 18% of adults were told they had arthritis, including 17% of males and 38% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Diagnosed with arthritis	27%	19%	19%	23%	18%	31%	26%

The following graphs demonstrate the lifetime prevalence rates of arthritis by gender for Ohio residents.



(Source: 2018 BRFSS)

Arthritis: Key Public Health Messages

Early diagnosis of arthritis and self-management activities can help people decrease their pain, improve function, and stay productive.

Key self-management activities include the following:

1. **Learn arthritis management strategies** – Arthritis management strategies provide those with arthritis with the skills and confidence to effectively manage their condition. Self-Management Education has proven to be valuable for helping people change their behavior and better manage their arthritis symptoms. Interactive workshops such as the Arthritis Self-Management Program and the Chronic Disease Self-Management Program are low-cost (about $25 – $35) and available in communities across the country. Attending one of these programs can help a person learn ways to manage pain, exercise safely, and gain control of arthritis.
2. **Be active** – Research has shown that physical activity decreases pain, improves function, and delays disability. Make sure you get at least thirty minutes of moderate physical activity at least five days a week. You can get activity in ten-minute intervals.
3. **Watch your weight** – The prevalence of arthritis increases with increasing weight. Research suggests that maintaining a healthy weight reduces the risk of developing arthritis and may decrease disease progression. A loss of just eleven pounds can decrease the occurrence (incidence) of new knee osteoarthritis and a modest weight loss can help reduce pain and disability.
4. **See your doctor** – Although there is no cure for most types of arthritis, early diagnosis and appropriate management is important, especially for inflammatory types of arthritis. For example, early use of disease-modifying drugs can affect the course of rheumatoid arthritis. If you have symptoms of arthritis, see your doctor and begin appropriate management of your condition.
5. **Protect your joints** – Joint injury can lead to osteoarthritis. People who experience sports or occupational injuries or have jobs with repetitive motions like repeated knee bending have more osteoarthritis. Avoid joint injury to reduce your risk of developing osteoarthritis.

(Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, Updated on February 5, 2019)

Chronic Disease: Asthma

Key Findings

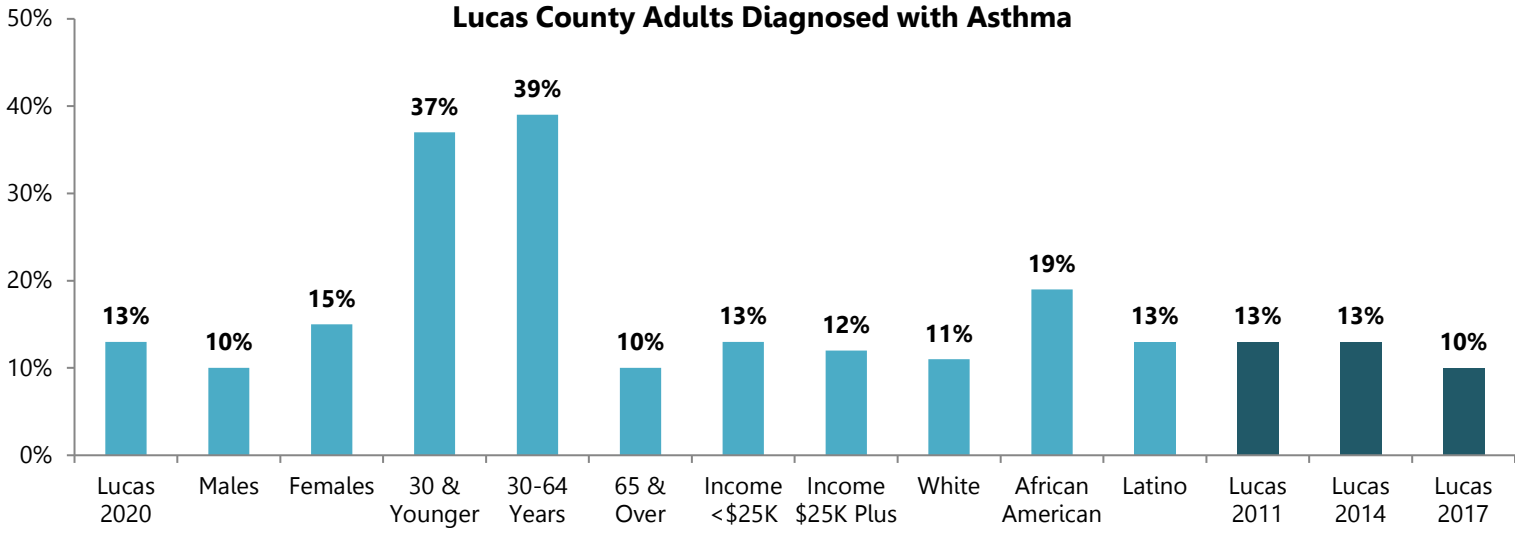
In 2020, 13% of Lucas County adults were diagnosed with asthma.

Asthma and Other Respiratory Disease

- In 2020, 13% of Lucas County adults were diagnosed with asthma.
- Sixty-eight percent (68%) of adults with asthma were currently receiving treatment for their diagnosis.
- Four percent (4%) of adults were diagnosed with chronic obstructive pulmonary disorder (COPD).
- Seventy-nine percent (79%) of adults were diagnosed with chronic obstructive pulmonary disorder (COPD) and were currently receiving treatment.
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; and infections linked to the flu, colds, and respiratory viruses *(Source: CDC, Asthma, Updated September 6, 2019).*
- Chronic lower respiratory disease was the fourth leading cause of death in Lucas County and the fourth leading cause of death in Ohio in 2016 to 2018 *(Source: Ohio Public Health Data Warehouse, 2016-2018).*

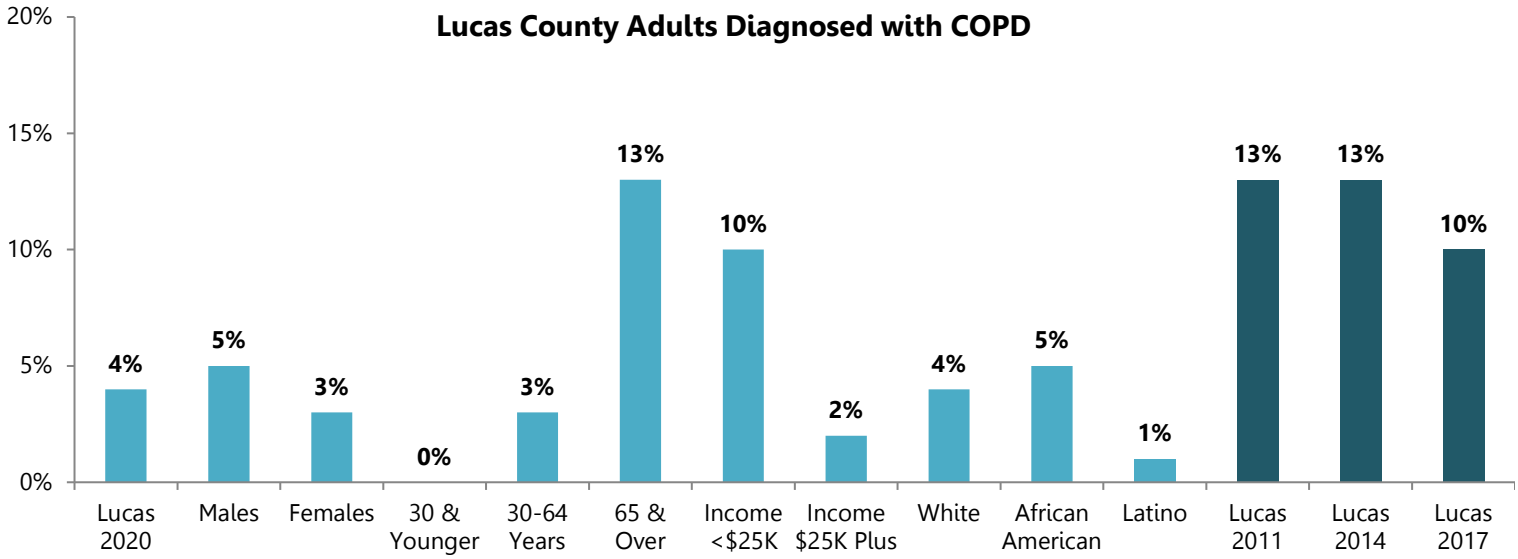
Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Diagnosed with asthma	12%	13%	13%	10%	13%	11%	10%

The following graph shows the percentage of Lucas County adults who were diagnosed with asthma. Examples of how to interpret the information include: 13% of adults were diagnosed with asthma, including 15% of females and 37% of those younger than the age of 30.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

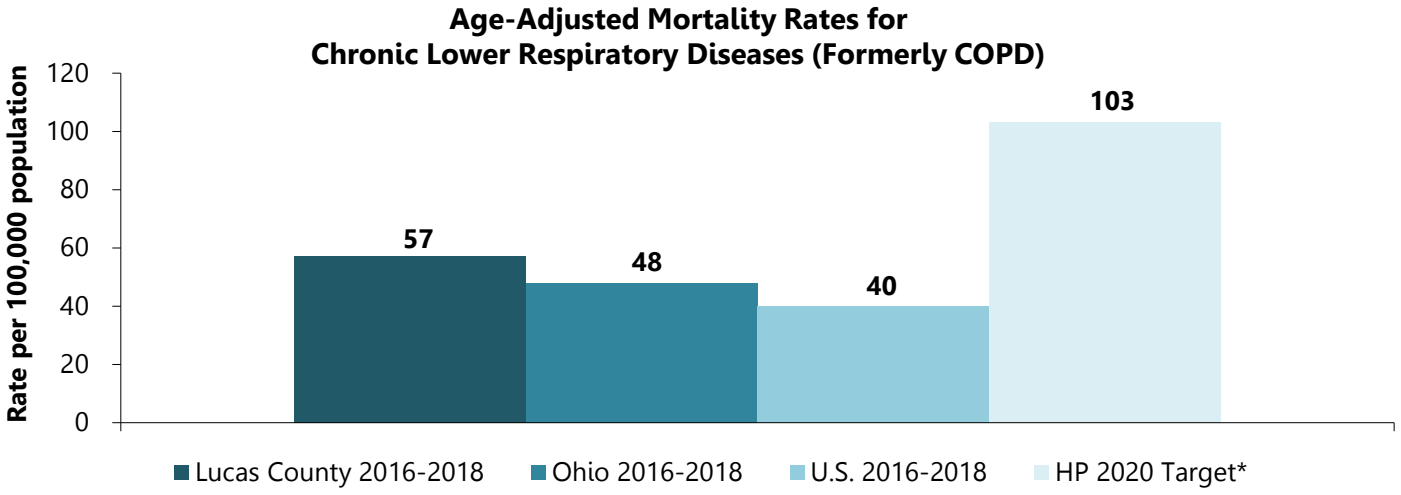
The following graph shows the percentage of Lucas County adults who were diagnosed with COPD. Examples of how to interpret the information include: 4% of adults were diagnosed with COPD, including 10% of adults with annual incomes less than $25,000 and 13% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

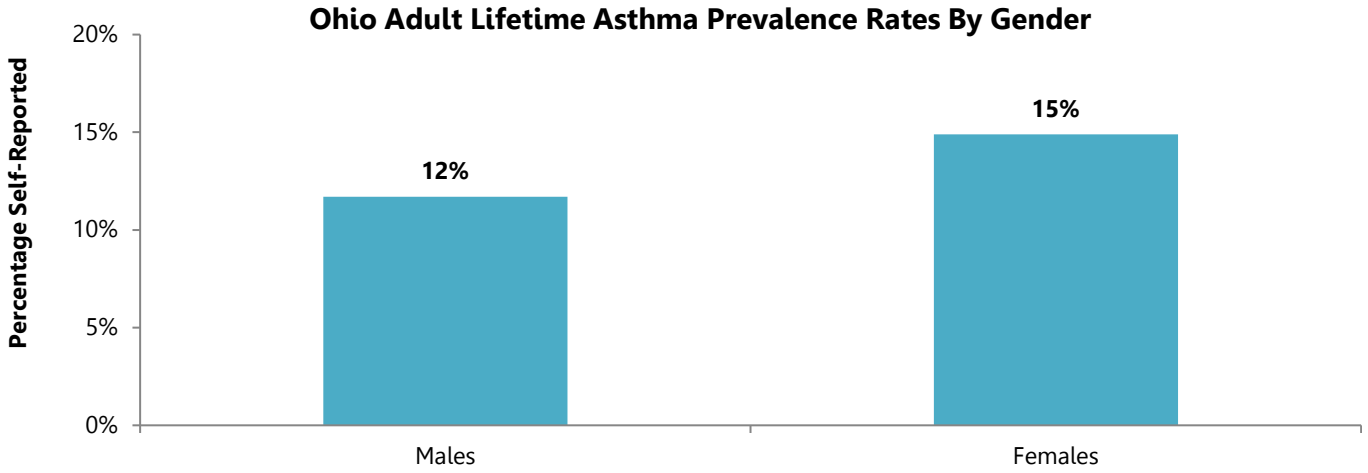
The following graph shows the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD) in comparison with the Healthy People 2020 objective. The graph shows:

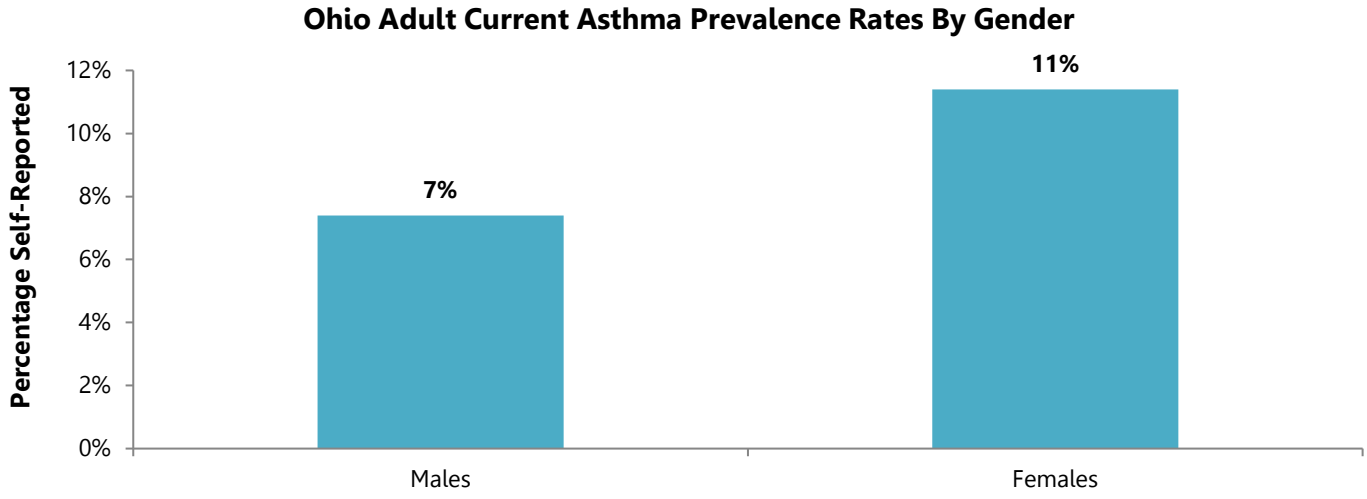
- From 2016 to 2018, Lucas County's age-adjusted mortality rate for chronic lower respiratory disease was higher than the Ohio and U.S. rate but lower than the Healthy People 2020 target objective rate.



(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)
**Healthy People 2020's target rate is for adults aged 45 years and older.*

The following graphs demonstrate the lifetime and current prevalence rates of asthma by gender for Ohio residents.





(Source: 2018 BRFSS)

Asthma Facts

- The number of Americans with asthma grows every year. Currently, 26.5 million Americans have asthma.
- More than 3,500 people die of asthma each year, nearly half of whom are age 65 or older.
- Asthma results in 439,000 hospitalizations and 1.3 million emergency room visits annually.
- Annually, patients with asthma reported 11 million visits to a doctor's office and 1.7 million visits to hospital outpatient departments
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

(Source: American College of Allergy, Asthma, & Immunology, Asthma Facts, updated June 13, 2018)

Chronic Disease: Diabetes

Key Findings

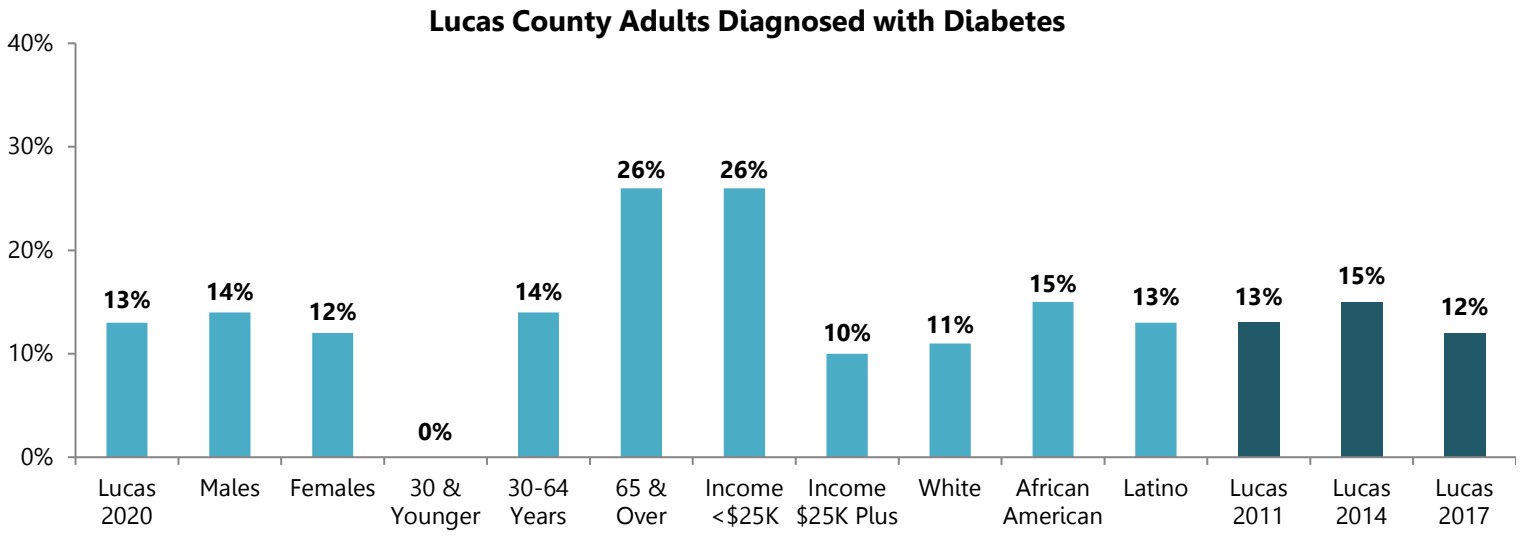
In 2020, 13% of Lucas County residents reported they were diagnosed with diabetes at some time in their lifetime. More than one-third (37%) of adults with diabetes rated their health as fair or poor.

13% of adults, or approximately 42,473 adults were diagnosed with diabetes.

Diabetes

- Thirteen percent (13%) of Lucas County adults were diagnosed with diabetes at some time in their lifetime, increasing to 26% of those older than the age of 65.
- One hundred percent (100%) of adults with diabetes were currently receiving treatment for the diagnosis.
- A test for A1C measures the average level of blood sugar over the past three months. Seven percent (7%) of Lucas County adults reported getting their A1C checked three or more times in the past year. Nine percent (9%) said two times, 25% said one time, 42% said none and 18% said they did not know if they had gotten their A1C checked within the past year.
- More than one-third (37%) of adults with diabetes rated their health as fair or poor.
- Lucas County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - Overweight or obese (90%)
  - High blood cholesterol (27%)
  - High blood pressure (25%)

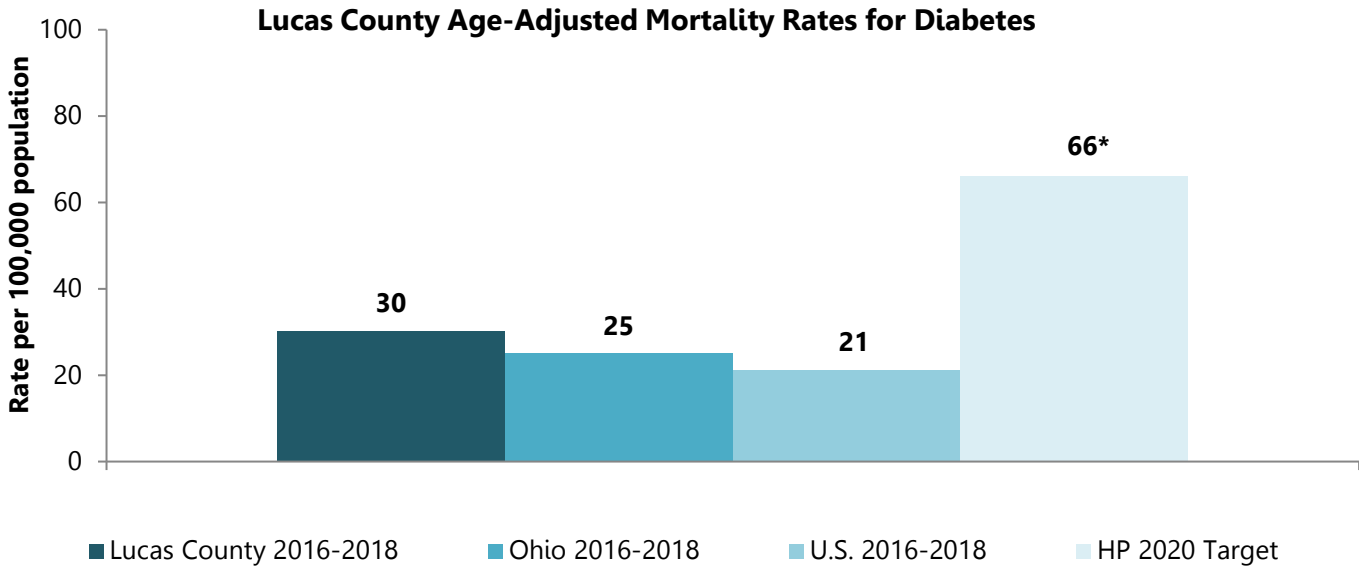
The following graph shows the percentage of Lucas County adults who were diagnosed with diabetes. Examples of how to interpret the information include: 13% of adults were diagnosed with diabetes, including 14% of males and 26% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show prevalence of diabetes by gender and the age-adjusted mortality rates from diabetes for Lucas County and Ohio residents with comparison to the Healthy People 2020 target objective.

- From 2016 to 2018, Lucas County's age-adjusted diabetes mortality rate was higher than Ohio and the U.S., but lower than the Healthy People 2020 target objective rate.



**The Healthy People 2020 rate is for all diabetes-related deaths.*
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2015-2017, Healthy People 2020)

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Diagnosed with diabetes	12%	13%	15%	12%	13%	12%	11%

Statistics About Diabetes

- Among the US population overall, crude estimates for 2018 indicated that:
  - 34.2 million people of all ages—or 10.5% of the US population—had diabetes.
  - 34.1 million adults aged 18 years or older—or 13.0% of all US adults—had diabetes.
  - 7.3 million adults aged 18 years or older who met laboratory criteria for diabetes were not aware of or did not report having diabetes. This number represents 2.8% of all US adults and 21.4% of all US adults with diabetes.
  - The percentage of adults with diabetes increased with age, reaching 26.8% among those aged 65 years or older.
- Among adults aged 18 or older in the U.S., 1.5 million new cases, or 6.9 per 1,000 persons, were diagnosed in 2018.
- Compared to adults aged 18 to 44 years, incidence rates of diagnosed diabetes in 2018 were higher among adults aged 45 to 64 years and those aged 65 years and older
- Prevalence of diagnosed diabetes was highest among American Indians/Alaska Native people (14.7%), people of Hispanic origin (12.5%), and non-Hispanic Black people (11.7%), followed by non-Hispanic Asians people (9.2%) and non-Hispanic white people (7.5%)

(Source: CDC, 2020 National Diabetes Statistics Report, Updated February 14, 2020)

Chronic Disease: Quality of Life

Key Findings

In 2020, 37% of Lucas County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (44%); arthritis/rheumatism (38%); stress, depression, anxiety and emotional problems (32%); chronic pain (25%); and sleep problems (22%).

37% of Lucas County adults, or approximately 120,885 adults were limited in some way because of a physical, mental or emotional problem.

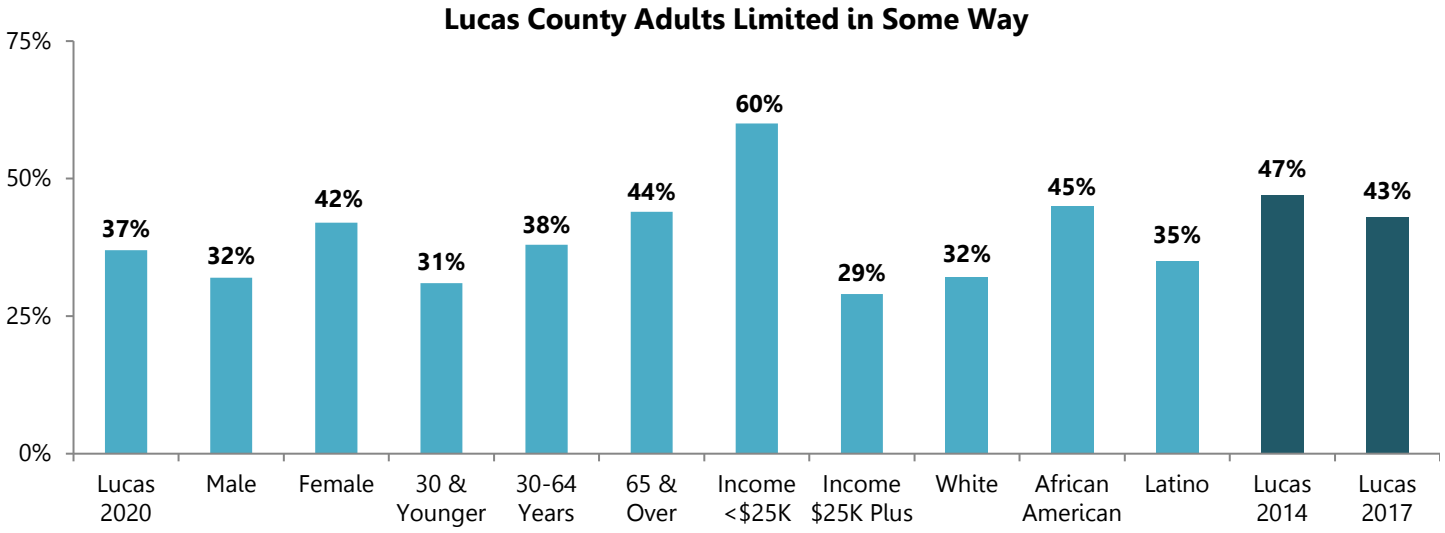
Impairments and Health Problems

- More than one-third (37%) of Lucas County adults were limited in some way because of a physical, mental or emotional problem increasing to 60% of those with annual incomes less than $25,000.
- Those who were limited in some way reported the following most limiting problems or impairments:
  - Back or neck problems (44%)
  - Arthritis/rheumatism (38%)
  - Stress, depression, anxiety, or emotional problems (32%)
  - Chronic pain (25%)
  - Sleep problems (22%)
  - Walking problems (19%)
  - Chronic illness (19%)
  - Fitness level (16%)
  - Fractures, bone/joint injuries (15%)
  - Eye/vision problems (14%)
  - Lung/breathing problems (11%)
  - Memory loss (8%)
  - Dental problems (8%)
  - Hearing problems (6%)
  - Mental health illness/disorder (4%)
  - Confusion (4%)
  - Learning disability (2%)
  - Substance dependency (2%)
  - Drug addiction (2%)
  - Other impairments/problems (7%)
- In 2020, Lucas County adults reported needing the following services or equipment: eyeglasses or vision services (32%), pain management (8%), canes (7%), walkers (5%), medical supplies (5%), help with routine needs (5%), help with personal care needs (4%), hearing aids or hearing care (3%), wheelchairs (2%), oxygen or respiratory support (1%), wheelchair ramps (1%), a personal emergency response systems (1%), mobility aids or devices (1%), and special beds (1%).
- More than one-fourth (27%) of Lucas County adults had fallen in the past year, increasing to 37% of those 65 and older.

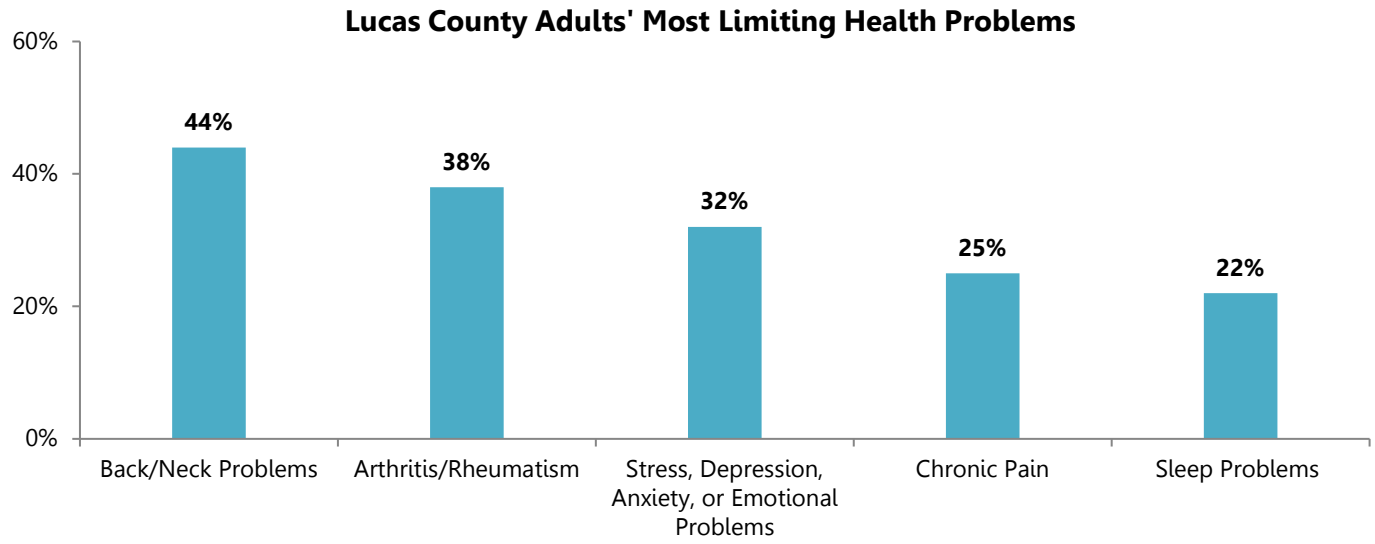
Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Limited in some way because of physical, mental or emotional problem	42%	N/A	47%	43%	37%	21%*	20%*

N/A – Not Available
**2015 BRFSS Data*

The following graphs show the percentage of Lucas County adults who were limited in some way and the most limiting health problems. Examples of how to interpret the information on the first graph include: 37% of Lucas County adults were limited in some way, including 32% of males and 44% of those ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



Healthy People 2020

Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Lucas County 2020	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	38%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
(Sources: Healthy People 2020 Objectives, 2019/2020 Lucas County Health Assessment)

Chronic Disease: Cardiovascular Health

Key Findings

Four percent (4%) of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Thirty-nine percent (39%) had high blood pressure, 38% were obese, 27% had high blood cholesterol, and 15% were current smokers, which are four known risk factors for heart disease and stroke.

Lucas County
Leading Causes of Death
2016-2018

Total Deaths: 14,042

1. Heart Disease (25% of all deaths)
2. Cancer (21%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Ohio
Leading Causes of Death
2016-2018

Total Deaths: 367,518

1. Heart Disease (23% of all deaths)
2. Cancers (21%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Heart Disease and Stroke

- Four percent (4%) of adults reported they were diagnosed with angina.
- Sixty percent (60%) of those with angina were receiving treatment for the diagnosis.
- Four percent (4%) of adults reported they had a heart attack.
- Sixty-eight percent (68%) of those who had a heart attack reported currently receiving treatment for the diagnosis.
- Three percent (3%) of adults reported they had a stroke.
- Forty-three percent (43%) of those who had a stroke reported currently receiving treatment for the diagnosis.
- Six percent (6%) of adults reported they had heart disease, increasing to 14% of those older than the age of 65.
- More than four-fifths (84%) of adults with heart disease were receiving treatment for it.

4% of Lucas County adults or approximately 13,069 adults survived a heart attack or myocardial infarction.

High Blood Pressure (Hypertension)

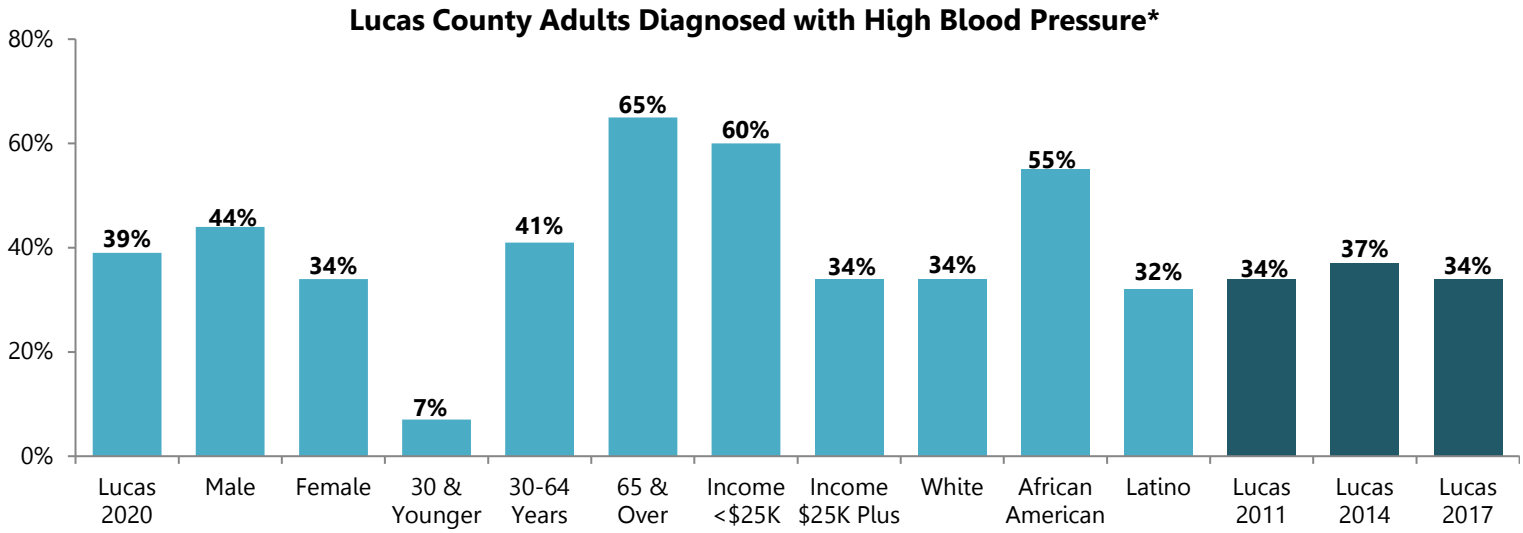
- Nearly two-fifths (39%) of adults had been diagnosed with high blood pressure. Ninety-one percent (91%) of adults reported they were currently receiving treatment for the diagnosis.
- Lucas County adults diagnosed with high blood pressure were more likely to have:
  - Been classified as overweight or obese by body mass index (BMI) (87%)
  - Been ages 65 years or older (65%)
  - Annual incomes less than $25,000 (60%)

High Blood Cholesterol

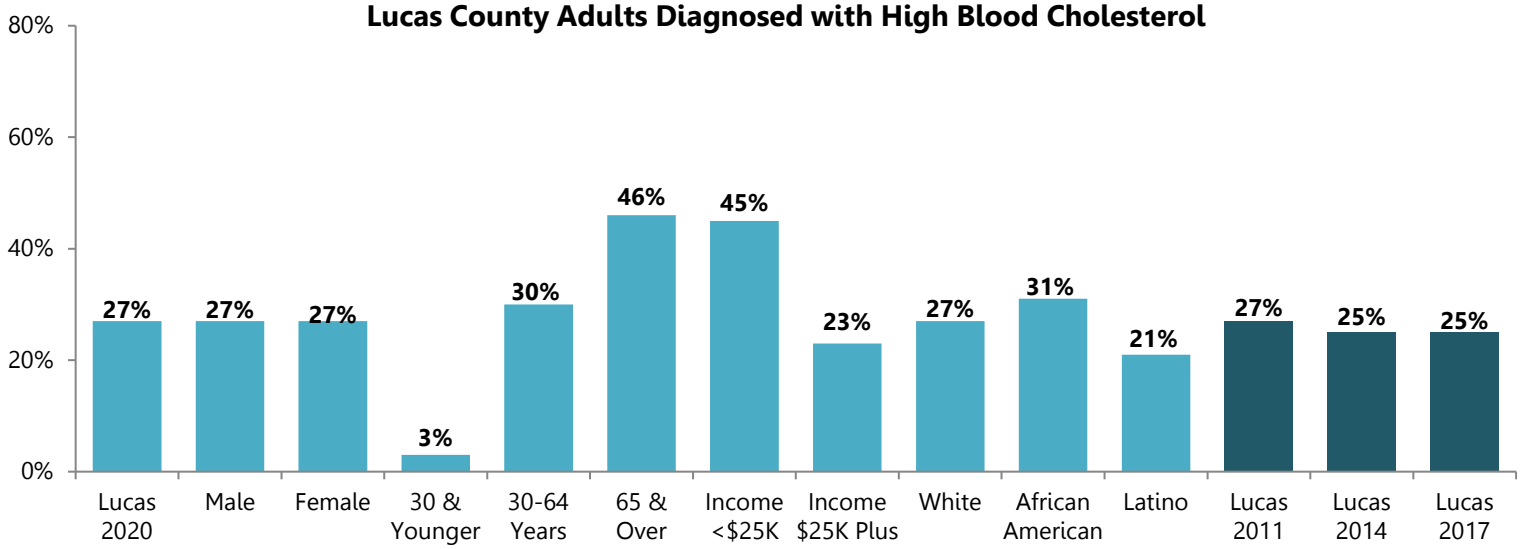
- More than one-fourth (27%) of adults had been diagnosed with high blood cholesterol. Eighty percent (80%) of adults reported they were currently receiving treatment for the diagnosis.
- More than three-quarters (81%) of adults had their blood cholesterol checked within the past five years.
- Lucas County adults with high blood cholesterol were more likely to:
  - Have been classified as overweight or obese by body mass index (BMI) (83%)

- Have been ages 65 years or older (46%)
- Annual incomes less than $25,000 (45%)

The following graphs show the number of Lucas County adults who have been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 39% of all Lucas County adults have been diagnosed with high blood pressure, including 44% of males, 34% of females, and 65% of those 65 years and older.

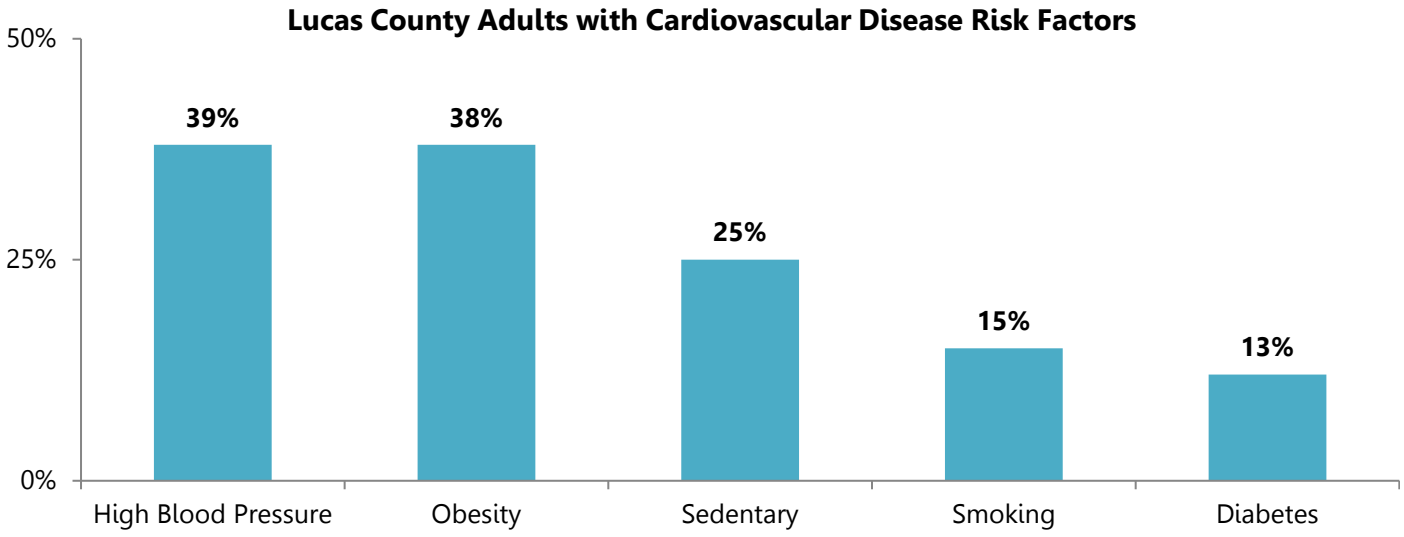


**Does not include respondents who indicated high blood pressure during pregnancy only.*



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph demonstrates the percentage of Lucas County adults who had major risk factors for developing cardiovascular disease (CVD).

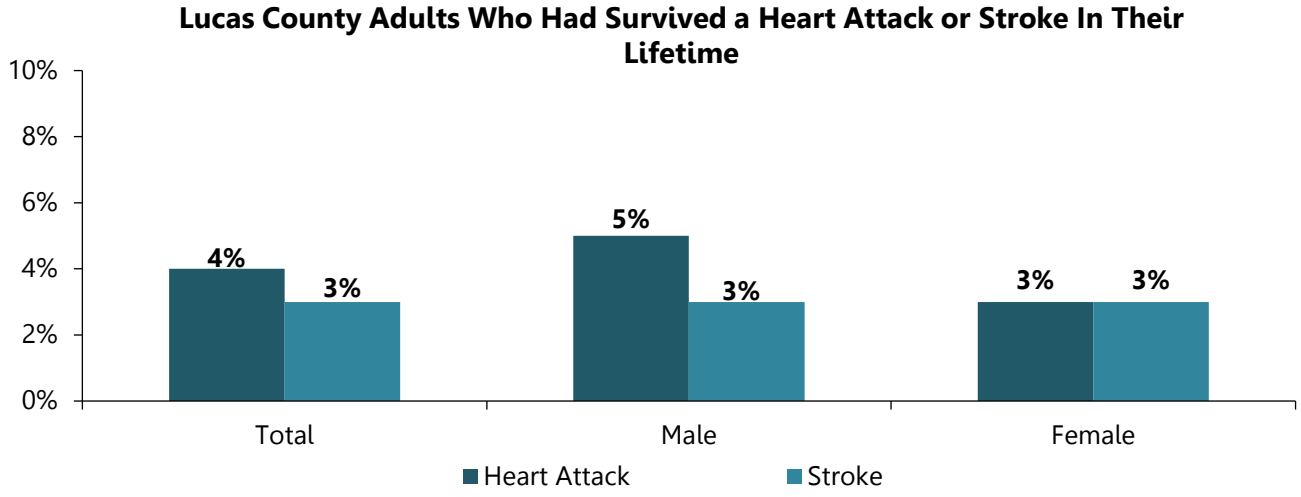


Healthy People 2020 Objectives
Heart Disease and Stroke (HDS)

Objective	2020 Lucas Survey Population Baseline	2017 U.S. Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	39%	35% Adults age 18 and older	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	81%	85% Adults age 18 and older	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	27%	33% Adults age 20+ with TBC>240 mg/dl	14%

Note: All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020, 2017 BRFSS, 2019/2020 Lucas County Health Assessment)

The following graph shows the percentage of Lucas County adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 5% of Lucas County males survived a heart attack compared to 3% of females.



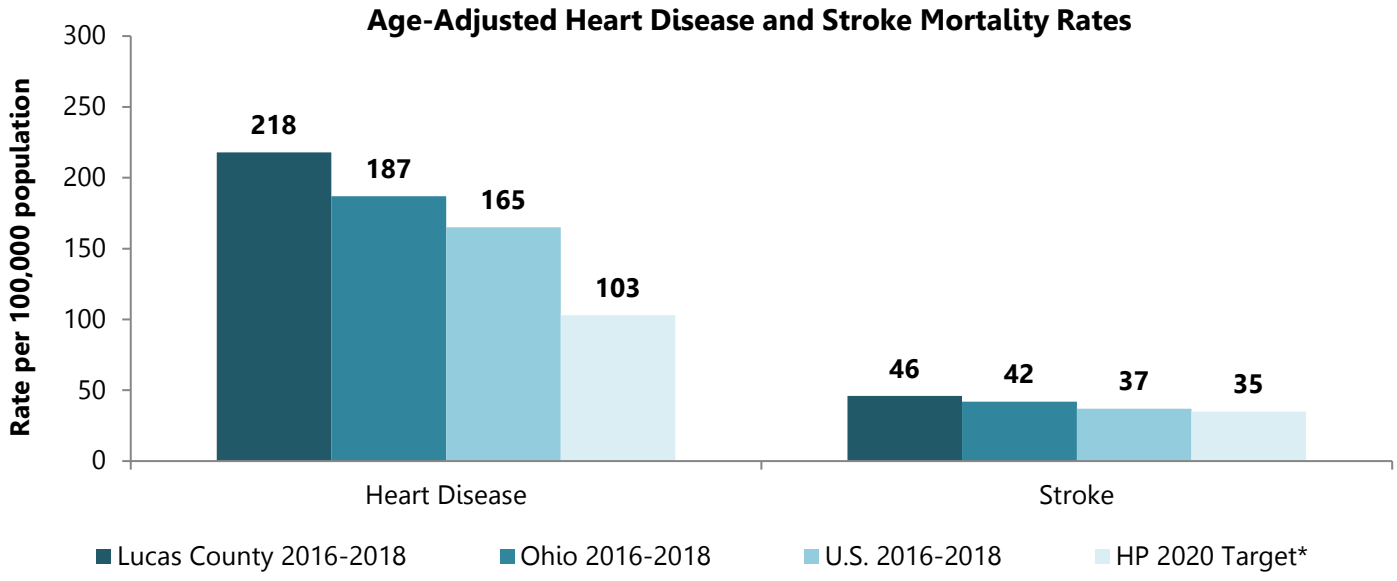
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Had angina	7%	3%	5%	2%	4%	5%	4%
Had a heart attack	N/A	3%	5%	5%	4%	5%	4%
Had a stroke	N/A	2%	3%	3%	3%	4%	3%
Had been diagnosed with high blood pressure	35%	34%	37%	34%	39%	35%	32%
Had been diagnosed with high blood cholesterol	34%	27%	25%	25%	27%	33%	33%
Had their blood cholesterol checked within the last five years	72%	76%	80%	77%	81%	85%	87%

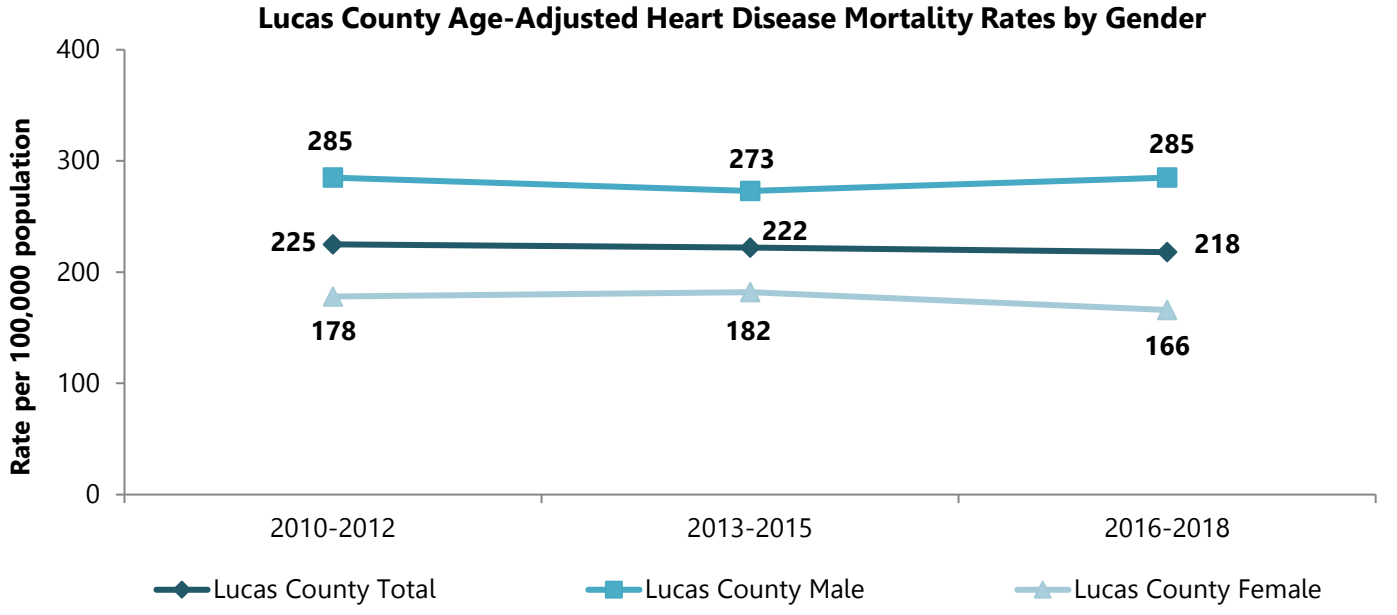
N/A – Not Available

The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- When age differences are accounted for, the statistics indicate that the Lucas County heart disease mortality rate was higher than the figures for the state, the U.S., and the Healthy People 2020 target from 2016 to 2018.
- The 2016 to 2018 Lucas County age-adjusted stroke mortality rate was higher than the figures for the state, the U.S., and the Healthy People 2020 target.
- From 2010 to 2018, Lucas County female and male age-adjusted heart disease mortality rates fluctuated.



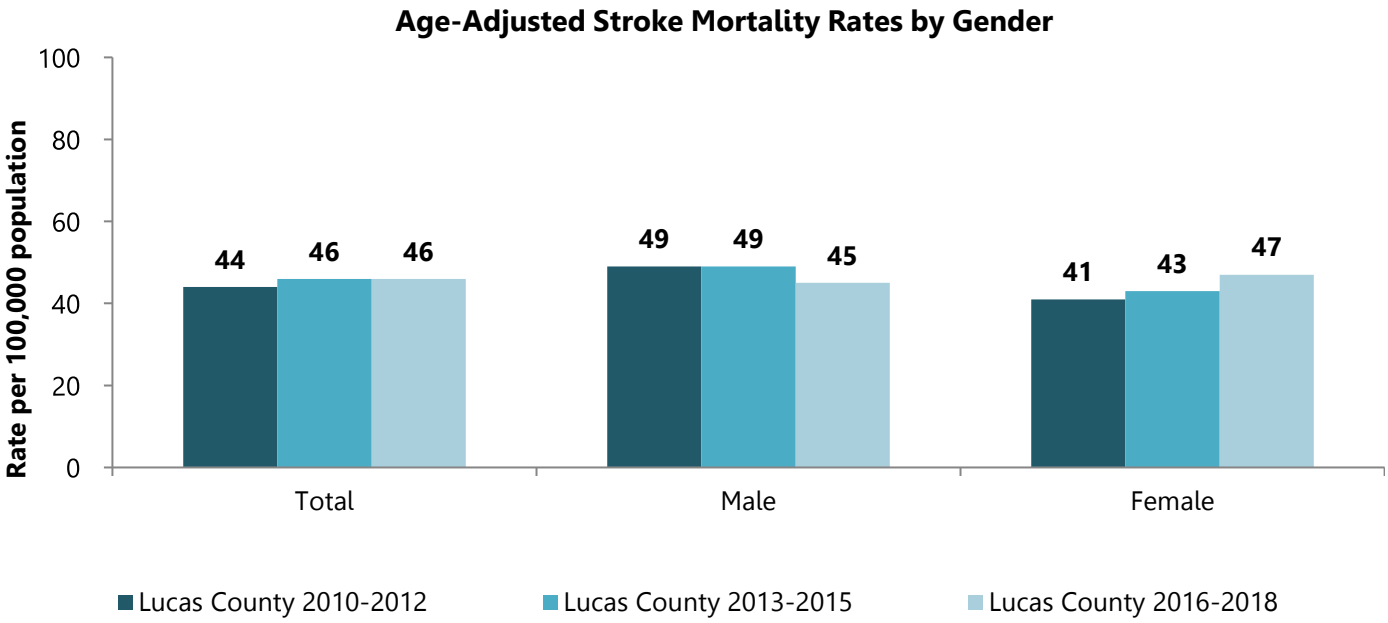
**The Healthy People 2020 Target objective for coronary heart disease is reported for heart attack mortality.*
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2015-2017, Healthy People 2020)



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for stroke by gender.

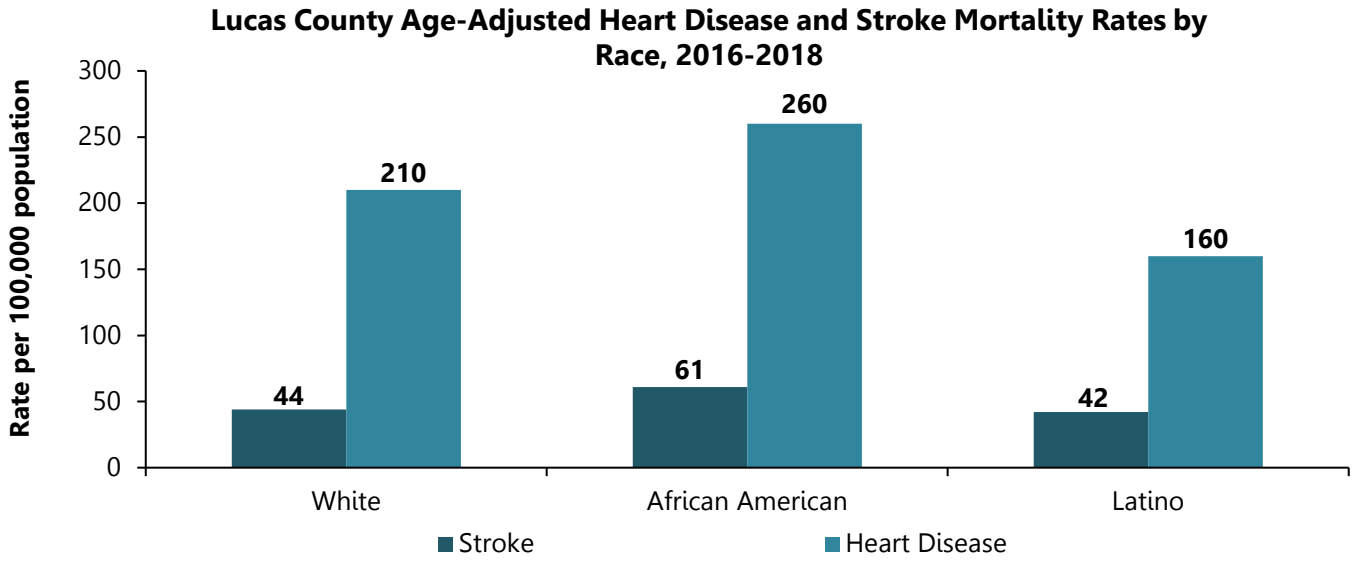
- From 2010 to 2018, the Lucas County stroke mortality rate stayed relatively stable.



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by race. The graph shows:

- From 2016 to 2018, the age-adjusted stroke and heart disease mortality rates were higher in the African American population than in the white and Latino populations.



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 3/27/20)

Chronic Disease: Cancer

Key Findings

In 2020, 12% of Lucas County adults were been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (2,980) of all (14,042) Lucas County resident deaths.

Lucas County
Incidence of Cancer, 2013-2017

All Types: 11,959 cases

- Lung and Bronchus: 1,729 cases (14%)
- Breast: 1,679 cases (14%)
- Prostate: 1,468 cases (12%)
- Colon and Rectum: 1,097 cases (9%)

In 2016-2018, there were 2,980 cancer deaths in Lucas County.

(Source: Ohio Cancer Incidence Surveillance System, Ohio Public Health Data Warehouse, 2013-2017)

Adult Cancer

- Twelve percent (12%) of Lucas County adults were diagnosed with cancer at some point in their lifetime, increasing to 29% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: breast (29%), other skin cancer (20%), prostate (9%), melanoma (7%), cervical (6%), bladder (5%), leukemia (3%), endometrial (3%), colon (3%), renal (3%), lung (3%), head and neck (1%), esophageal (1%), bone (1%), non-Hodgkin's lymphoma (1%), and other types of cancer (13%). Nine percent (9%) of adults were diagnosed with multiple types of cancer.
- Lucas County adults reported receiving the following cancer screenings:
  - Colorectal cancer in the past five years (26%)
  - Oral cancer in the past year (16%)
  - Skin cancer in the past year (15%)
  - Lung cancer in the past three years (4%)

12% of Lucas County adults, or approximately 39,206 adults were diagnosed with cancer at some point in their lifetime.

Cancer Facts

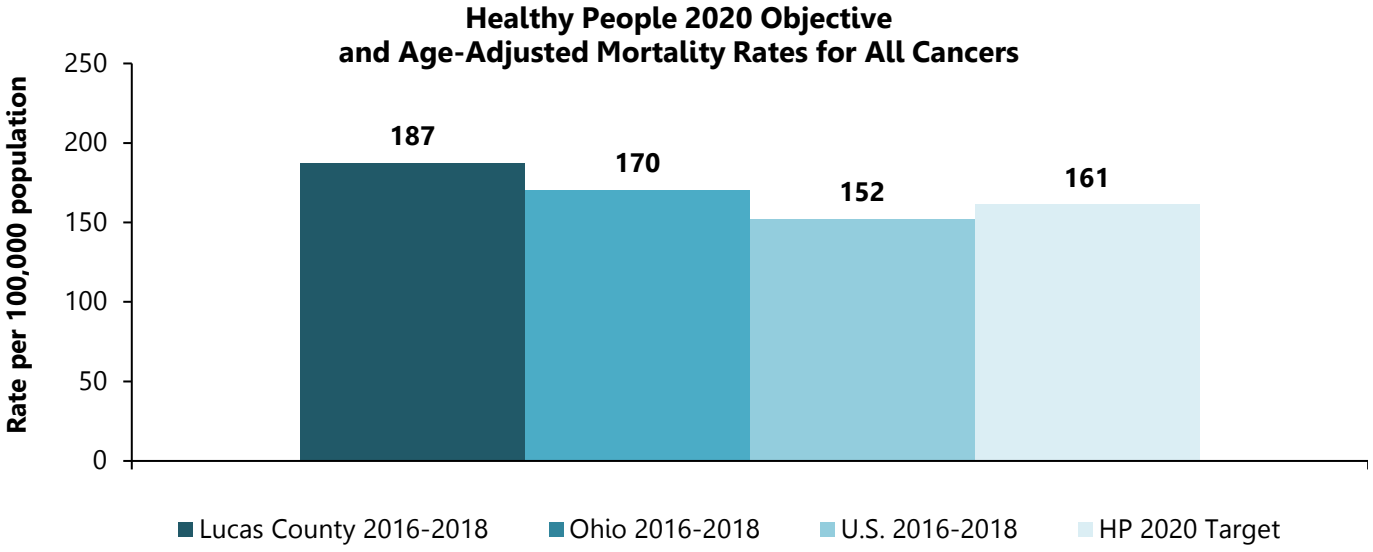
- The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (2,980) of all (14,042) Lucas County resident deaths *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- The American Cancer Society states that about 606,520 Americans are expected to die of cancer in 2019. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease *(Source: American Cancer Society, Facts & Figures 2020).*

Cancer Fast Facts

- Cancer is the second leading cause of death in the United States, but many kinds of cancer can be prevented or caught early.
- Leading risk factors for preventable cancers are smoking, getting too much UV radiation from the sun or tanning beds, being overweight or obese, and drinking too much alcohol.
- Some kinds of cancer (like breast, cervical, and colorectal) can be caught early through screening. Other kinds of cancer can be prevented. For example, cervical cancer through vaccination and colorectal cancer can be prevented through removing precancerous growths in the colon and rectum.
- The cost of cancer care in the United States is expected to reach almost $174 billion by 2020.

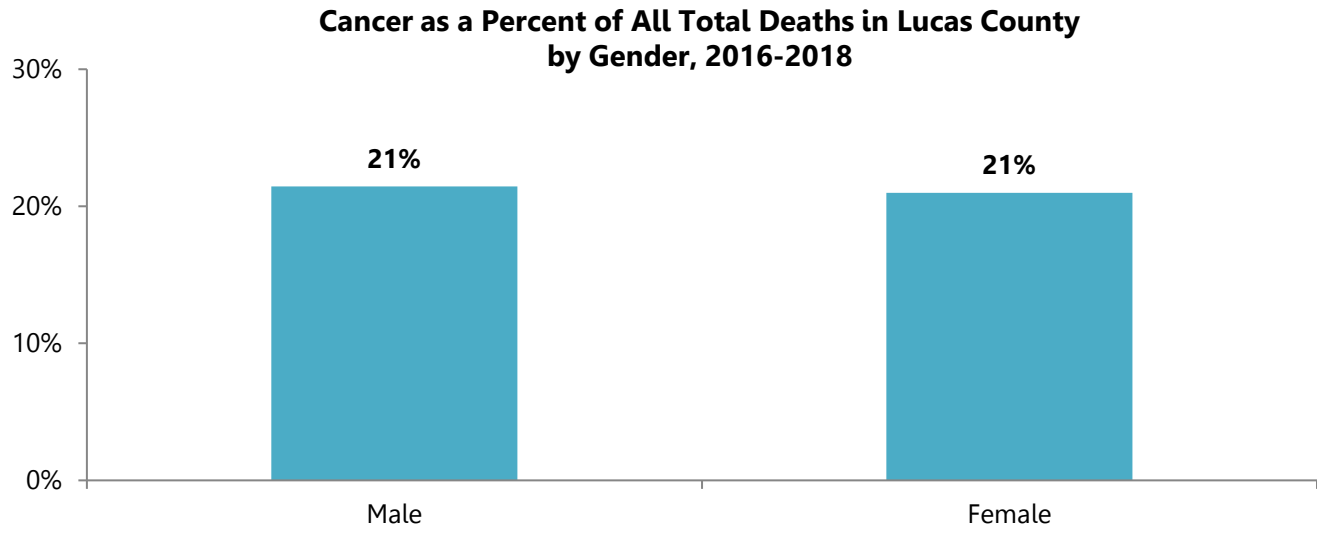
(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Cancer, Updated April 15, 2020)

The following graph shows the Lucas County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population) for all types of cancer in comparison to the Healthy People 2020 objective.



(Source: Ohio Public Health Data Warehouse, CDC Wonder, Healthy People 2020)

The following graph shows cancer as a percent of total deaths in Lucas County.

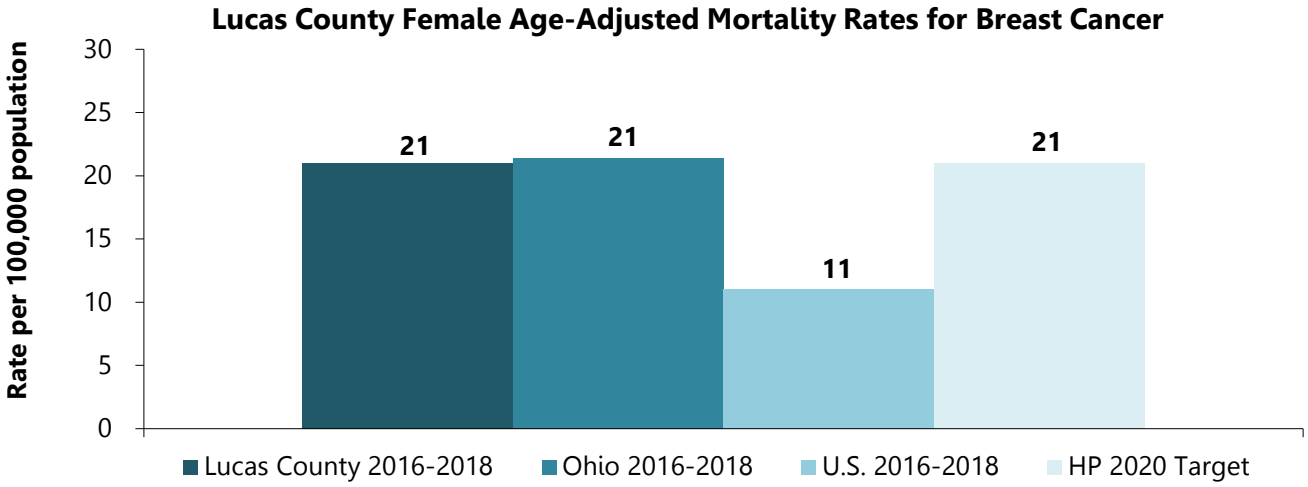


(Source: Ohio Public Health Data Warehouse, 2016-2018)

Breast Cancer

- In 2020, 55% of Lucas County females reported having a clinical breast examination in the past year.
- More than half (58%) of Lucas County females older than the age of 40 had a mammogram in the past year.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommend that those 40 to 44 years of age have the option to begin annual mammography, those 45 to 54 should undergo annual mammography, and those 55 years of age and older may transition to biennial mammography or continue annual mammography. Women should continue mammography as long as overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual magnetic resonance imaging (MRI) is recommended in addition to mammography, typically starting at age 30 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for breast cancer in comparison with the Healthy People 2020 objective.

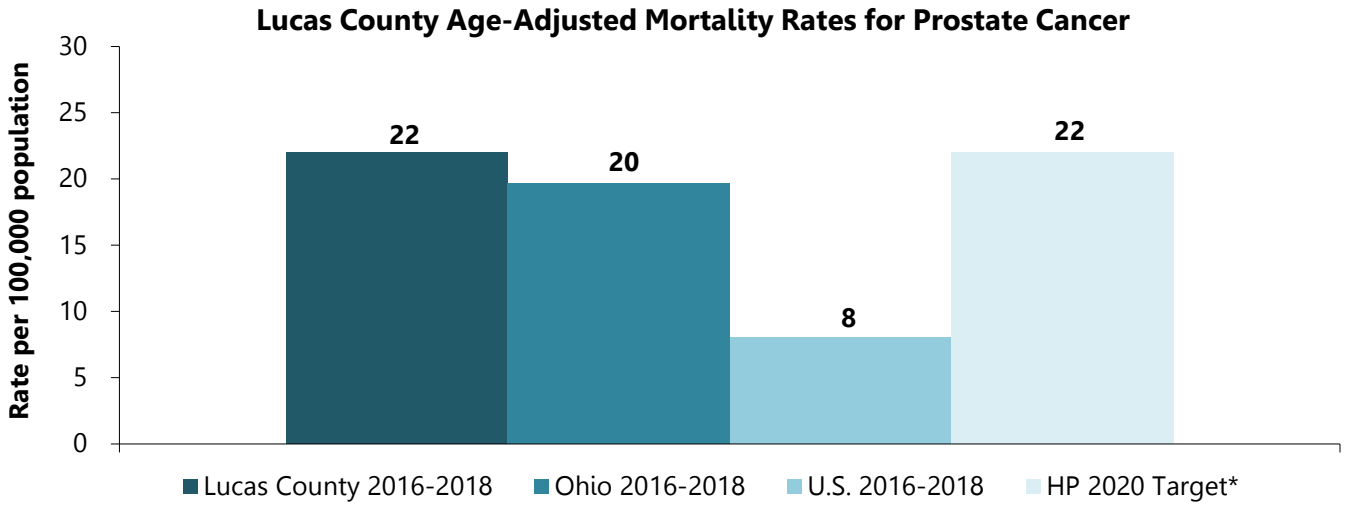


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

Prostate Cancer

- Nearly half (48%) of Lucas County men had a digital rectal exam in their lifetime, and 12% had one in the past year.
- ODH statistics indicate that prostate cancer accounted for 9% of all male cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- No organizations presently endorse routine prostate cancer screening for men at average risk because of concerns about the high rate of overdiagnosis (detecting disease that would never have caused symptoms or harm), along with the significant potential for serious side effects associated with prostate cancer treatment. The American Cancer Society recommends that beginning at age 50, men who are at average risk of prostate cancer and have a life expectancy of at least 10 years have a conversation with their health care provider about the benefits and limitations of PSA testing and make an informed decision about whether to be tested based on their personal values and preferences. Men at high risk of developing prostate cancer (Black men or those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at age 40 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for prostate cancer in comparison with the Healthy People 2020 objective.

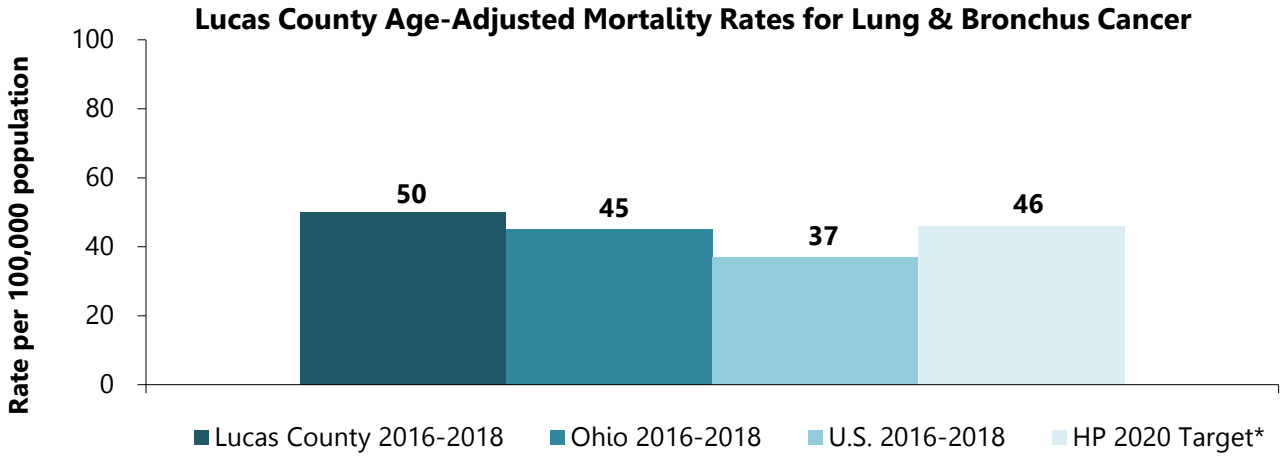


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

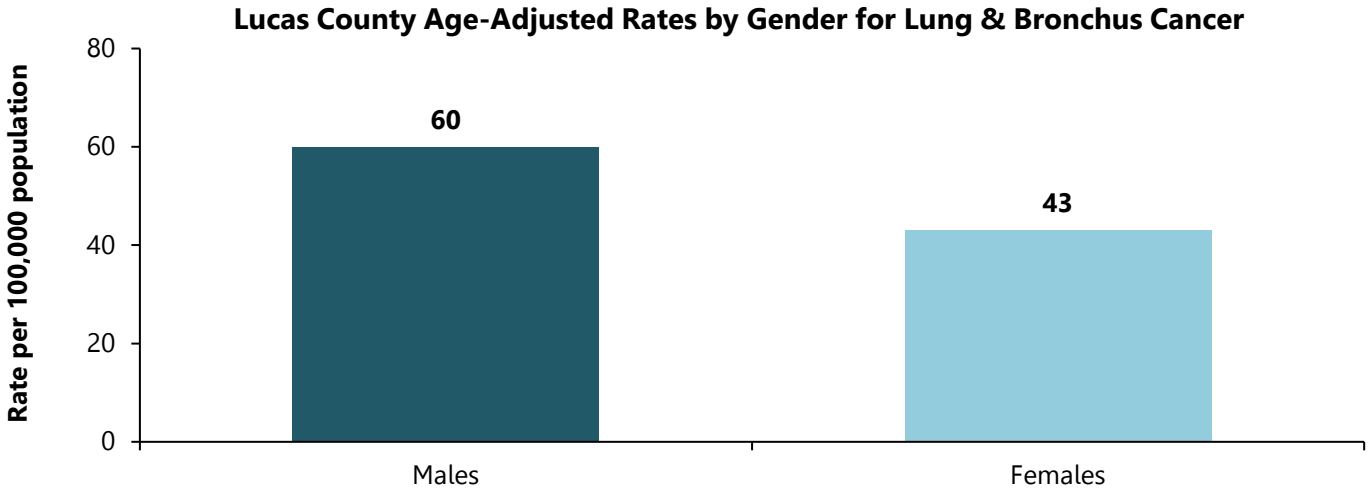
Lung Cancer

- In Lucas County, 15% of male adults were current smokers and 25% were former smokers.
- ODH reports that lung and bronchus cancer (total deaths=802) was the leading cause of male cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- ODH reports that lung and bronchus cancer was the leading cause of female cancer deaths (total deaths=387) in Lucas County from 2016 to 2018, followed by breast (total deaths=184) and colorectal cancers (total deaths=142) *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for lung and bronchus cancer in comparison with the Healthy People 2020 objective, as well as by gender.



**Healthy People 2020 Target data is for lung cancer only*
(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

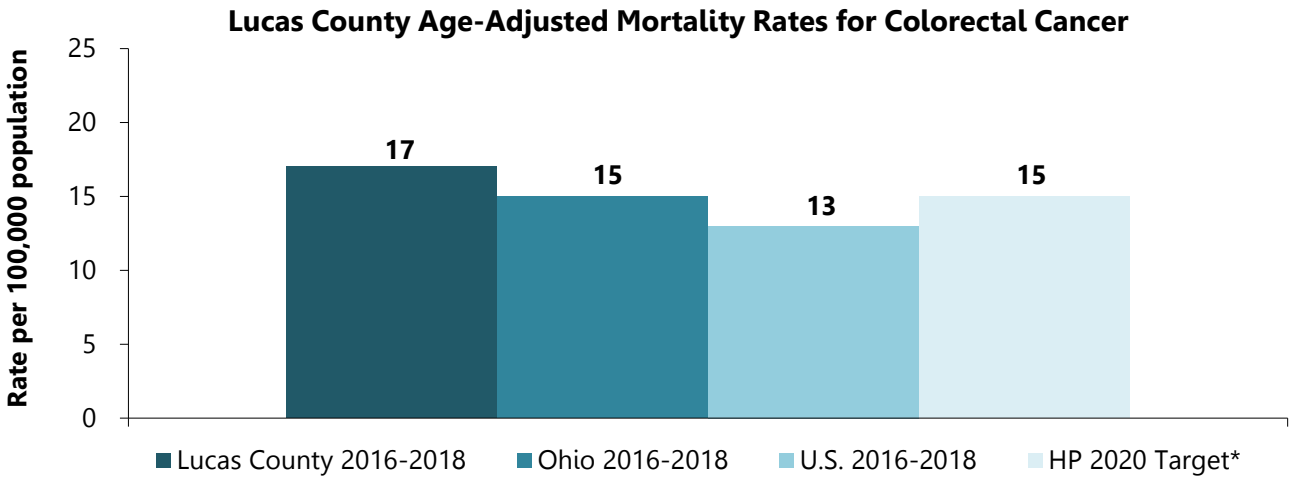


(Source: Ohio Public Health Data Warehouse 2016-2018)

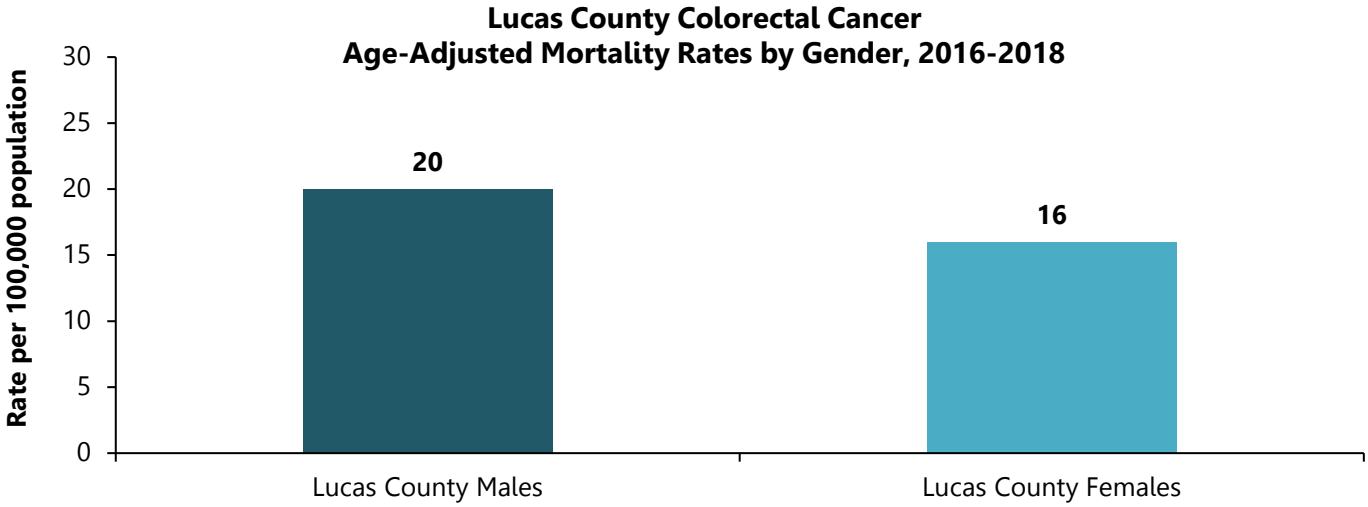
Colorectal Cancer

- ODH indicates that colorectal cancer accounted for 9% of all male and 10% of female cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- Modifiable factors that increase colorectal cancer risk include obesity, physical inactivity, long-term smoking, high consumption of red or processed meat, low calcium intake, moderate to heavy alcohol consumption, and very low intake of fruits and vegetables and whole-grain fiber. Hereditary and medical factors that increase risk include a personal or family history of colorectal cancer and/or polyps, certain inherited genetic conditions, a personal history of chronic inflammatory bowel disease, and type 2 diabetes *(Source: American Cancer Society, Facts & Figures 2020).*
- Screening can prevent colorectal cancer through the detection and removal or precancerous growths, as well as detect cancer at an early stage. Regular screenings with either stool tests or exams (e.g., colonoscopy) results in a reduction in premature colorectal cancer death. New guidelines from the American Cancer Society recommend men and women at average risk for colorectal cancer be screened starting at age 45 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for colorectal cancer in comparison with the Healthy People 2020 objective, as well as by gender.



(Source: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018`)



(Source: Ohio Public Health Data Warehouse 2016-2018)

Lucas County Incidence of Cancer, 2013-2017

Types of Cancer	Age-Adjusted Rate	Number of Cases
Lung and Bronchus	66.6	1,729
Breast	67.0	1,679
Prostate	67.0	1,679
Colorectal	114.8	1,468
Other Sites/Types	33.9	857
Bladder	22.7	583
Melanoma of Skin	21.4	535
Non-Hodgkins Lymphoma	18.3	461
Uterus	29.6	433
Kidney & Renal Pelvis	16.4	419
Pancreas	14.9	388
Oral Cavity & Pharynx	12.4	335
Thyroid	13.8	303
Leukemia	11.2	278
Liver & Intrahepatic Bile Duct	7.4	205
Stomach	7.4	185
Brain and Other CNS	7.4	176
Multiple Myeloma	6.9	175
Ovary	12.2	165
Esophagus	6.1	161
Larynx	4.2	110
Cervix	8.4	96
Hodgkins Lymphoma	3.3	73
Testis	4.8	48
Total		11,959

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 2/7/2020)

2020 Cancer Estimates

- In 2020, more than 1.8 million new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about 18% of the new cancer cases expected to occur in the U.S. in 2020 will be related to being overweight or obsity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 606,520 Americans are expected to die of cancer in 2020.
- 80% of lung cancer deaths in the U.S are attributed to smoking.
- In 2019, estimates predicted that there will be 71,850 new cases of cancer and 25,380 cancer deaths in Ohio.
- Of the new cancer cases in Ohio, approximately 10,110 (14%) will be from lung and bronchus cancers and 4,100 (6%) will be from melanoma (skin) cancer.
- About 10,350 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 7,030 (10%).

(Source: American Cancer Society, Facts and Figures 2020)

Chronic Disease: Arthritis

Key Findings

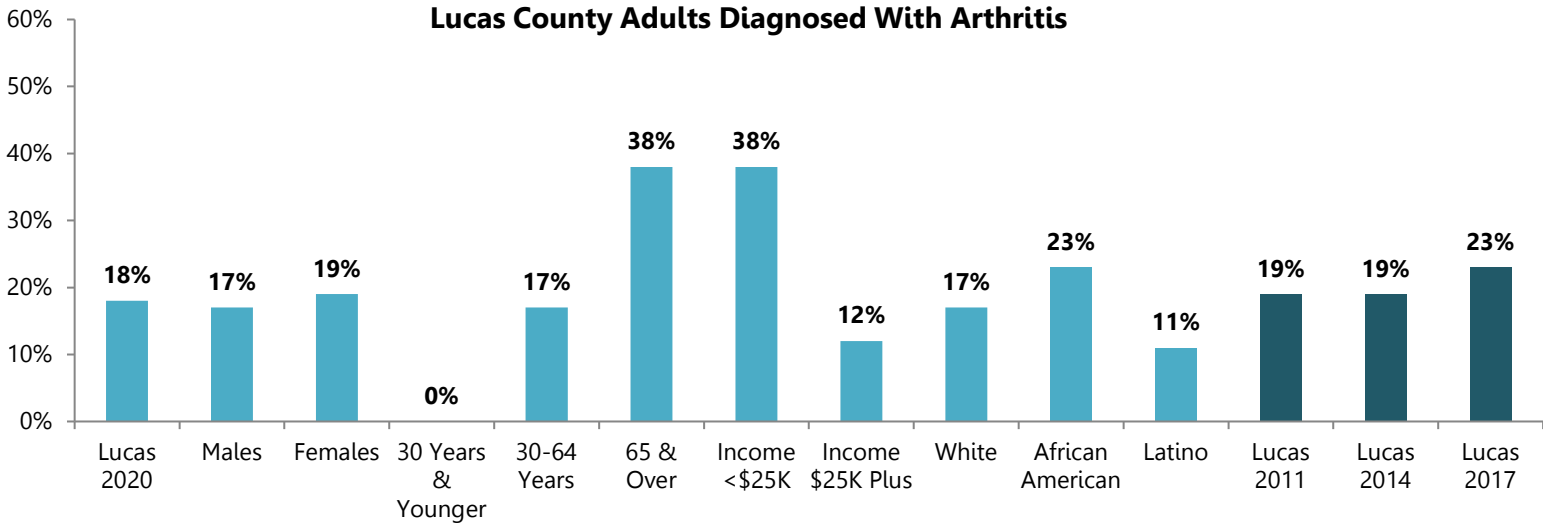
Eighteen percent (18%) of Lucas County adults were diagnosed with arthritis.

Arthritis

- Eighteen percent (18%) of Lucas County adults were diagnosed with arthritis, increasing to 38% of those older than the age of 65.
- Sixty-six percent (66%) of adults with arthritis were currently receiving treatment for their diagnosis.

18% of Lucas County adults, or approximately 58,809 adults were diagnosed with arthritis.

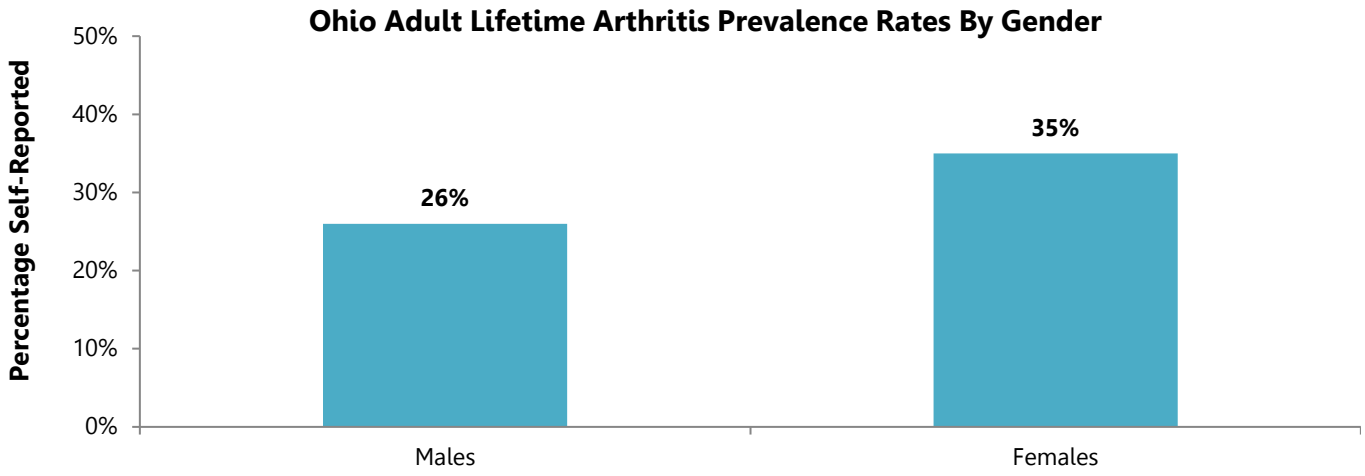
The following graph shows the percentage of Lucas County adults who were told by a doctor they had arthritis. An example of how to interpret the information includes: 18% of adults were told they had arthritis, including 17% of males and 38% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Diagnosed with arthritis	27%	19%	19%	23%	18%	31%	26%

The following graphs demonstrate the lifetime prevalence rates of arthritis by gender for Ohio residents.



(Source: 2018 BRFSS)

Arthritis: Key Public Health Messages

Early diagnosis of arthritis and self-management activities can help people decrease their pain, improve function, and stay productive.

Key self-management activities include the following:

1. **Learn arthritis management strategies** – Arthritis management strategies provide those with arthritis with the skills and confidence to effectively manage their condition. Self-Management Education has proven to be valuable for helping people change their behavior and better manage their arthritis symptoms. Interactive workshops such as the Arthritis Self-Management Program and the Chronic Disease Self-Management Program are low-cost (about $25 – $35) and available in communities across the country. Attending one of these programs can help a person learn ways to manage pain, exercise safely, and gain control of arthritis.
2. **Be active** – Research has shown that physical activity decreases pain, improves function, and delays disability. Make sure you get at least thirty minutes of moderate physical activity at least five days a week. You can get activity in ten-minute intervals.
3. **Watch your weight** – The prevalence of arthritis increases with increasing weight. Research suggests that maintaining a healthy weight reduces the risk of developing arthritis and may decrease disease progression. A loss of just eleven pounds can decrease the occurrence (incidence) of new knee osteoarthritis and a modest weight loss can help reduce pain and disability.
4. **See your doctor** – Although there is no cure for most types of arthritis, early diagnosis and appropriate management is important, especially for inflammatory types of arthritis. For example, early use of disease-modifying drugs can affect the course of rheumatoid arthritis. If you have symptoms of arthritis, see your doctor and begin appropriate management of your condition.
5. **Protect your joints** – Joint injury can lead to osteoarthritis. People who experience sports or occupational injuries or have jobs with repetitive motions like repeated knee bending have more osteoarthritis. Avoid joint injury to reduce your risk of developing osteoarthritis.

(Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, Updated on February 5, 2019)

Chronic Disease: Asthma

Key Findings

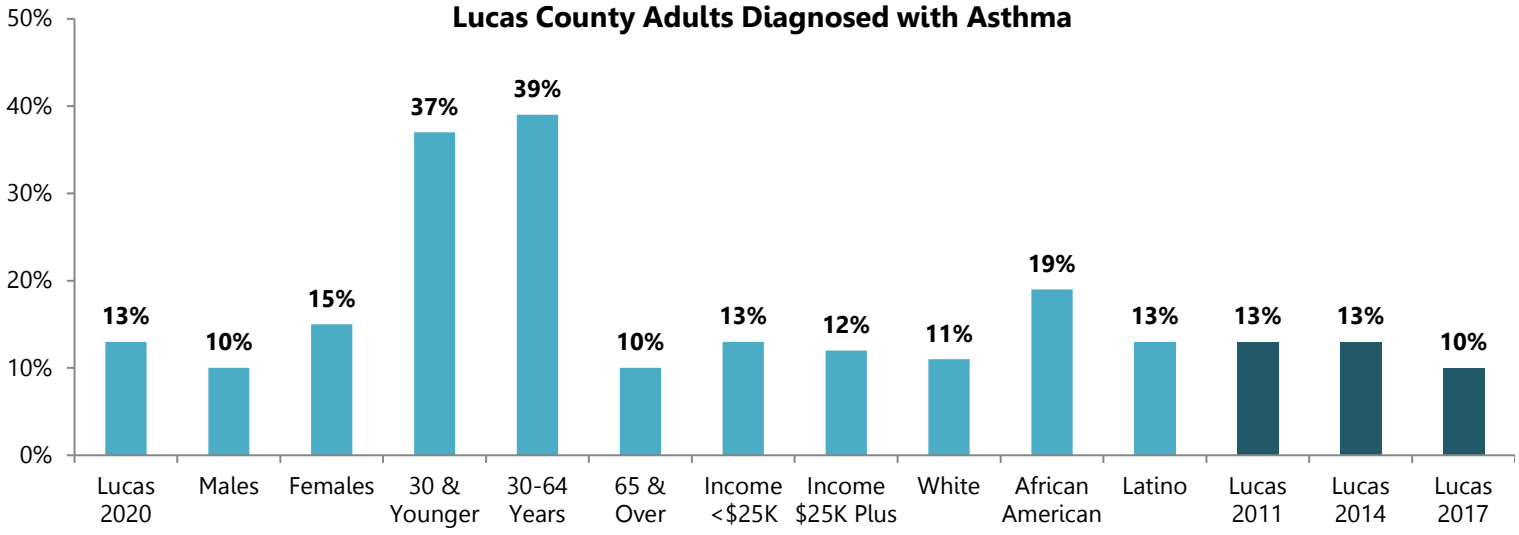
In 2020, 13% of Lucas County adults were diagnosed with asthma.

Asthma and Other Respiratory Disease

- In 2020, 13% of Lucas County adults were diagnosed with asthma.
- Sixty-eight percent (68%) of adults with asthma were currently receiving treatment for their diagnosis.
- Four percent (4%) of adults were diagnosed with chronic obstructive pulmonary disorder (COPD).
- Seventy-nine percent (79%) of adults were diagnosed with chronic obstructive pulmonary disorder (COPD) and were currently receiving treatment.
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; and infections linked to the flu, colds, and respiratory viruses *(Source: CDC, Asthma, Updated September 6, 2019).*
- Chronic lower respiratory disease was the fourth leading cause of death in Lucas County and the fourth leading cause of death in Ohio in 2016 to 2018 *(Source: Ohio Public Health Data Warehouse, 2016-2018).*

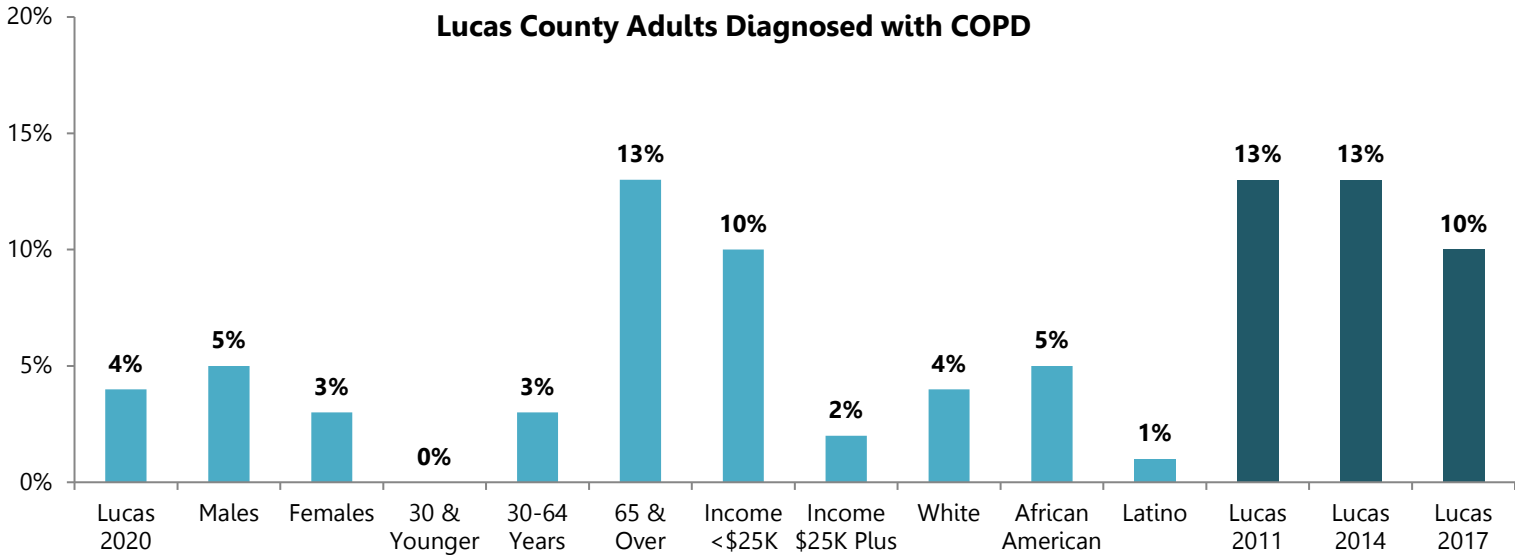
Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Diagnosed with asthma	12%	13%	13%	10%	13%	11%	10%

The following graph shows the percentage of Lucas County adults who were diagnosed with asthma. Examples of how to interpret the information include: 13% of adults were diagnosed with asthma, including 15% of females and 37% of those younger than the age of 30.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

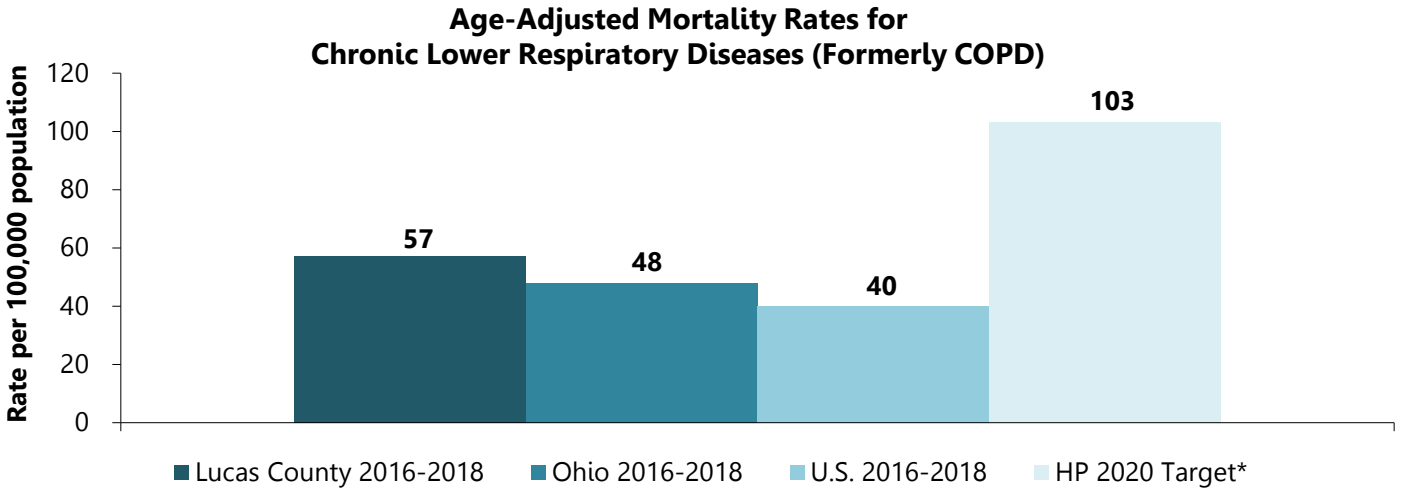
The following graph shows the percentage of Lucas County adults who were diagnosed with COPD. Examples of how to interpret the information include: 4% of adults were diagnosed with COPD, including 10% of adults with annual incomes less than $25,000 and 13% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

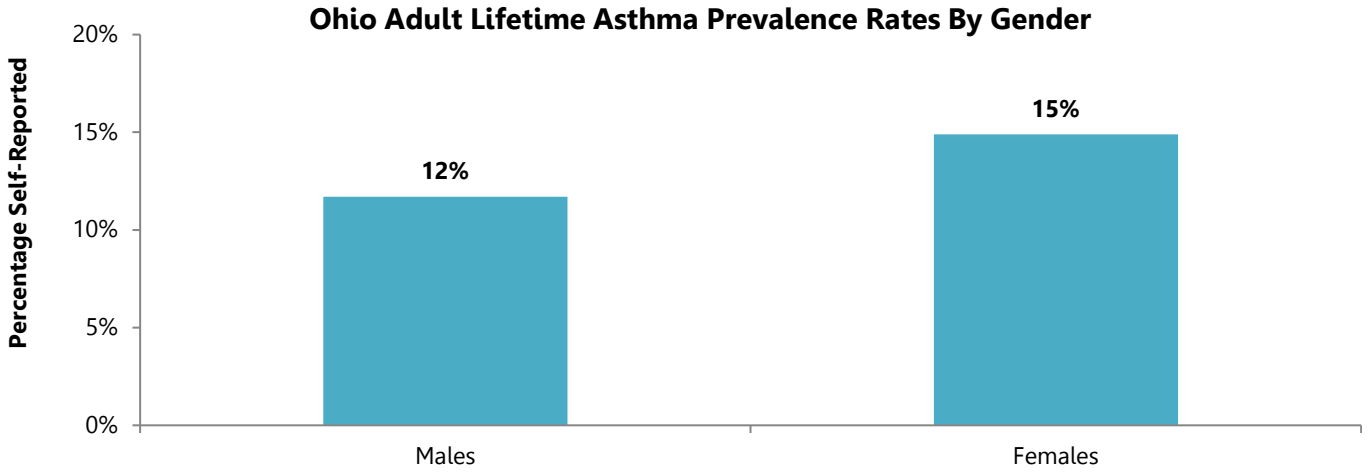
The following graph shows the Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD) in comparison with the Healthy People 2020 objective. The graph shows:

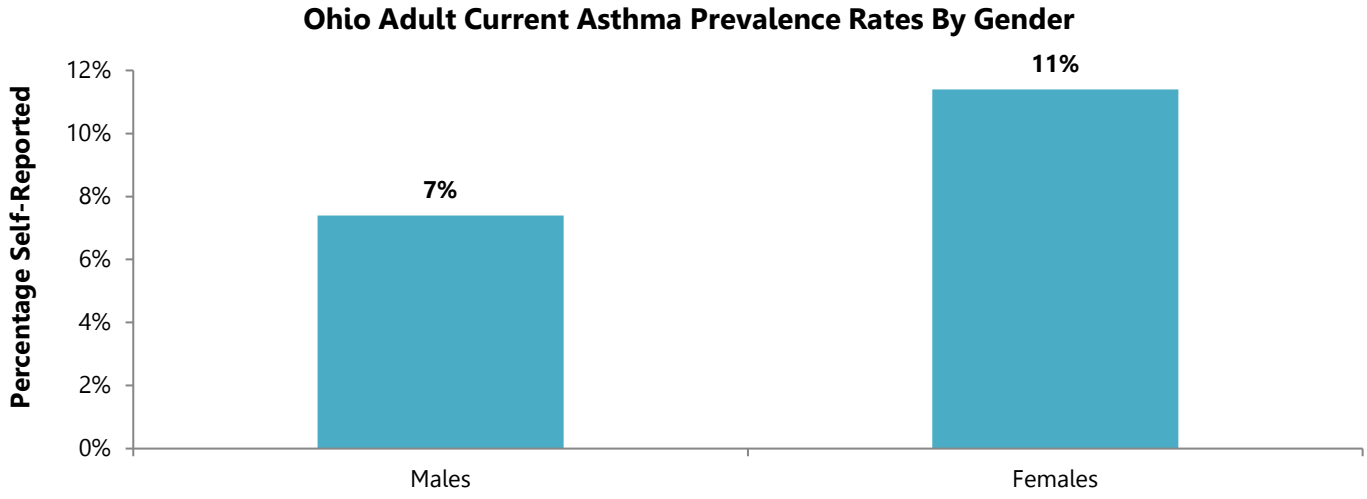
- From 2016 to 2018, Lucas County's age-adjusted mortality rate for chronic lower respiratory disease was higher than the Ohio and U.S. rate but lower than the Healthy People 2020 target objective rate.



(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)
**Healthy People 2020's target rate is for adults aged 45 years and older.*

The following graphs demonstrate the lifetime and current prevalence rates of asthma by gender for Ohio residents.





(Source: 2018 BRFSS)

Asthma Facts

- The number of Americans with asthma grows every year. Currently, 26.5 million Americans have asthma.
- More than 3,500 people die of asthma each year, nearly half of whom are age 65 or older.
- Asthma results in 439,000 hospitalizations and 1.3 million emergency room visits annually.
- Annually, patients with asthma reported 11 million visits to a doctor's office and 1.7 million visits to hospital outpatient departments
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

(Source: American College of Allergy, Asthma, & Immunology, Asthma Facts, updated June 13, 2018)

Chronic Disease: Diabetes

Key Findings

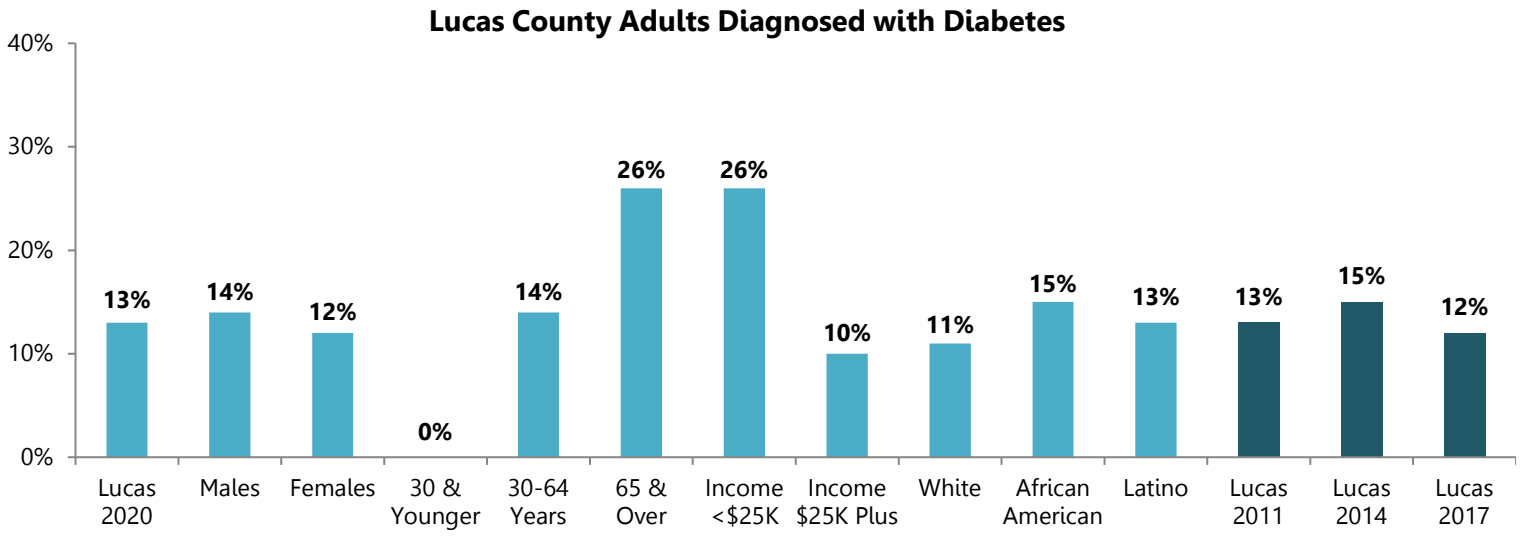
In 2020, 13% of Lucas County residents reported they were diagnosed with diabetes at some time in their lifetime. More than one-third (37%) of adults with diabetes rated their health as fair or poor.

13% of adults, or approximately 42,473 adults were diagnosed with diabetes.

Diabetes

- Thirteen percent (13%) of Lucas County adults were diagnosed with diabetes at some time in their lifetime, increasing to 26% of those older than the age of 65.
- One hundred percent (100%) of adults with diabetes were currently receiving treatment for the diagnosis.
- A test for A1C measures the average level of blood sugar over the past three months. Seven percent (7%) of Lucas County adults reported getting their A1C checked three or more times in the past year. Nine percent (9%) said two times, 25% said one time, 42% said none and 18% said they did not know if they had gotten their A1C checked within the past year.
- More than one-third (37%) of adults with diabetes rated their health as fair or poor.
- Lucas County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - Overweight or obese (90%)
  - High blood cholesterol (27%)
  - High blood pressure (25%)

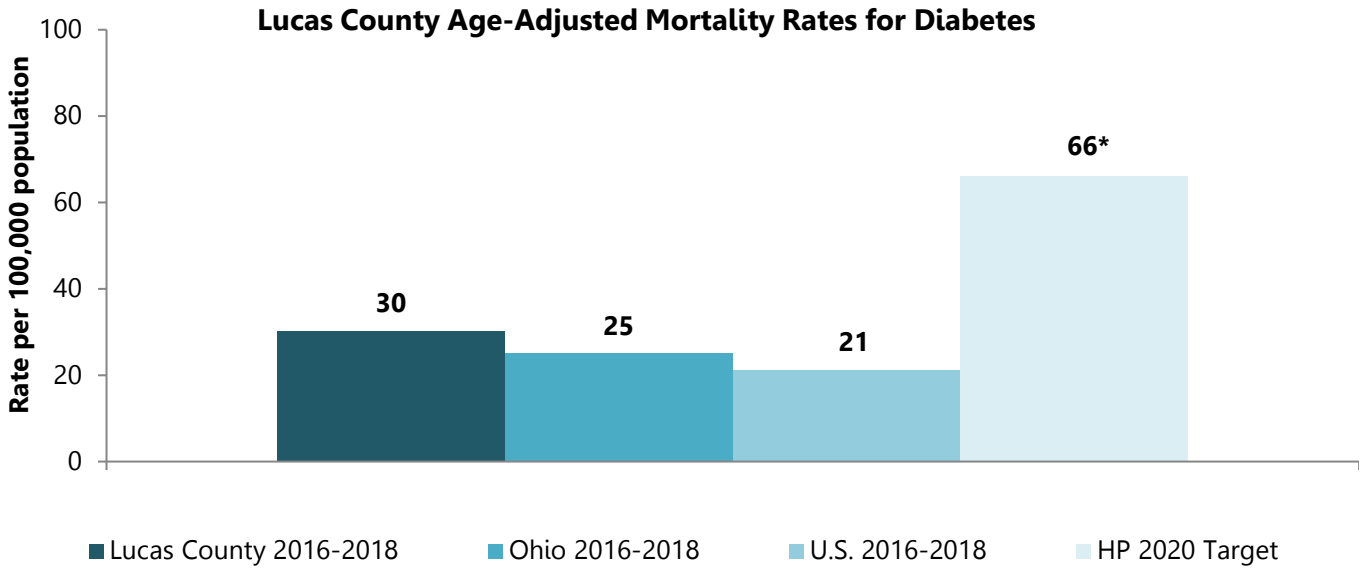
The following graph shows the percentage of Lucas County adults who were diagnosed with diabetes. Examples of how to interpret the information include: 13% of adults were diagnosed with diabetes, including 14% of males and 26% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show prevalence of diabetes by gender and the age-adjusted mortality rates from diabetes for Lucas County and Ohio residents with comparison to the Healthy People 2020 target objective.

- From 2016 to 2018, Lucas County's age-adjusted diabetes mortality rate was higher than Ohio and the U.S., but lower than the Healthy People 2020 target objective rate.



**The Healthy People 2020 rate is for all diabetes-related deaths.*
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2015-2017, Healthy People 2020)

Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Diagnosed with diabetes	12%	13%	15%	12%	13%	12%	11%

Statistics About Diabetes

- Among the US population overall, crude estimates for 2018 indicated that:
  - 34.2 million people of all ages—or 10.5% of the US population—had diabetes.
  - 34.1 million adults aged 18 years or older—or 13.0% of all US adults—had diabetes.
  - 7.3 million adults aged 18 years or older who met laboratory criteria for diabetes were not aware of or did not report having diabetes. This number represents 2.8% of all US adults and 21.4% of all US adults with diabetes.
  - The percentage of adults with diabetes increased with age, reaching 26.8% among those aged 65 years or older.
- Among adults aged 18 or older in the U.S., 1.5 million new cases, or 6.9 per 1,000 persons, were diagnosed in 2018.
- Compared to adults aged 18 to 44 years, incidence rates of diagnosed diabetes in 2018 were higher among adults aged 45 to 64 years and those aged 65 years and older
- Prevalence of diagnosed diabetes was highest among American Indians/Alaska Native people (14.7%), people of Hispanic origin (12.5%), and non-Hispanic Black people (11.7%), followed by non-Hispanic Asians people (9.2%) and non-Hispanic white people (7.5%)

(Source: CDC, 2020 National Diabetes Statistics Report, Updated February 14, 2020)

Chronic Disease: Quality of Life

Key Findings

In 2020, 37% of Lucas County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (44%); arthritis/rheumatism (38%); stress, depression, anxiety and emotional problems (32%); chronic pain (25%); and sleep problems (22%).

37% of Lucas County adults, or approximately 120,885 adults were limited in some way because of a physical, mental or emotional problem.

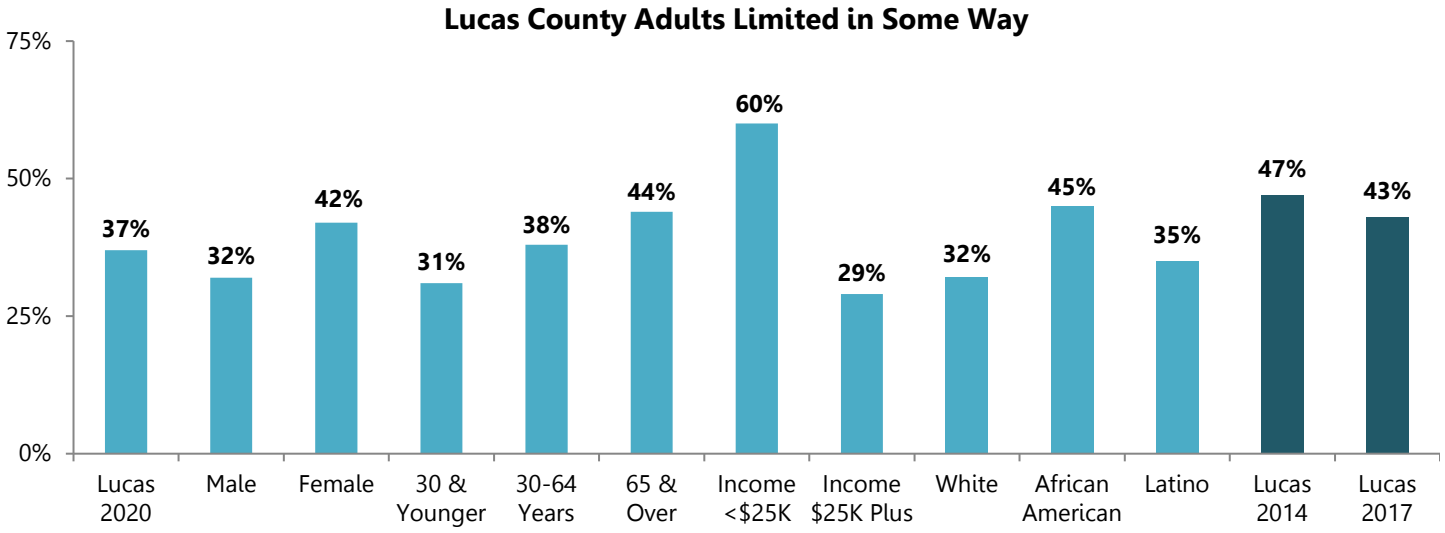
Impairments and Health Problems

- More than one-third (37%) of Lucas County adults were limited in some way because of a physical, mental or emotional problem increasing to 60% of those with annual incomes less than $25,000.
- Those who were limited in some way reported the following most limiting problems or impairments:
  - Back or neck problems (44%)
  - Arthritis/rheumatism (38%)
  - Stress, depression, anxiety, or emotional problems (32%)
  - Chronic pain (25%)
  - Sleep problems (22%)
  - Walking problems (19%)
  - Chronic illness (19%)
  - Fitness level (16%)
  - Fractures, bone/joint injuries (15%)
  - Eye/vision problems (14%)
  - Lung/breathing problems (11%)
  - Memory loss (8%)
  - Dental problems (8%)
  - Hearing problems (6%)
  - Mental health illness/disorder (4%)
  - Confusion (4%)
  - Learning disability (2%)
  - Substance dependency (2%)
  - Drug addiction (2%)
  - Other impairments/problems (7%)
- In 2020, Lucas County adults reported needing the following services or equipment: eyeglasses or vision services (32%), pain management (8%), canes (7%), walkers (5%), medical supplies (5%), help with routine needs (5%), help with personal care needs (4%), hearing aids or hearing care (3%), wheelchairs (2%), oxygen or respiratory support (1%), wheelchair ramps (1%), a personal emergency response systems (1%), mobility aids or devices (1%), and special beds (1%).
- More than one-fourth (27%) of Lucas County adults had fallen in the past year, increasing to 37% of those 65 and older.

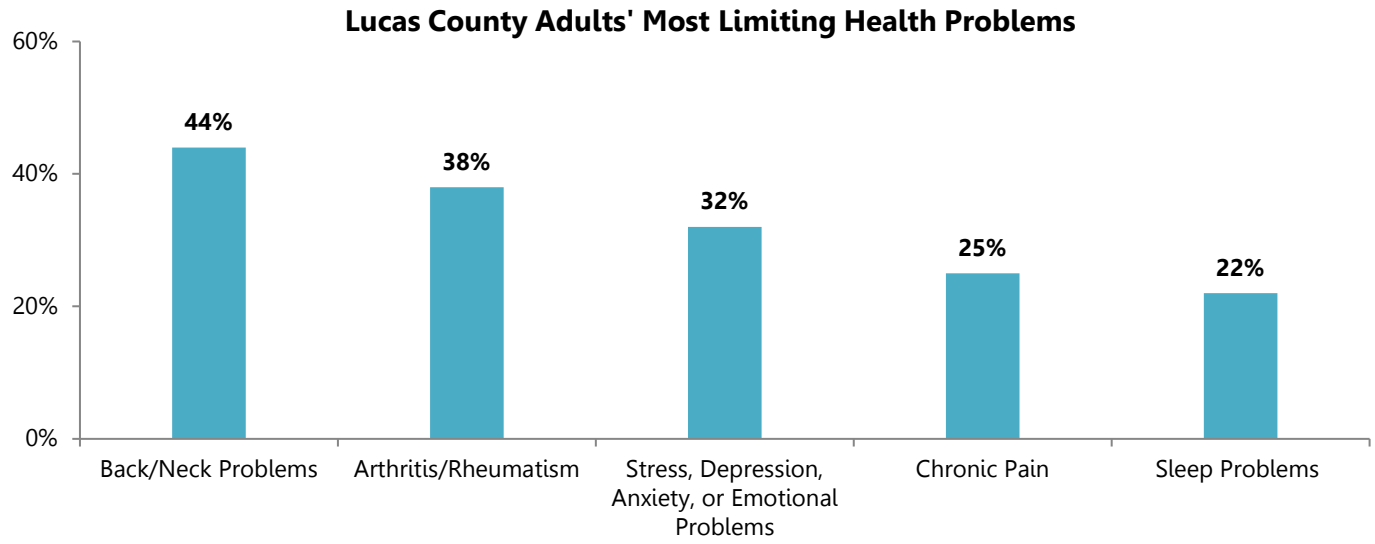
Adult Comparisons	Lucas County 2007	Lucas County 2011	Lucas County 2014	Lucas County 2017	Lucas County 2020	Ohio 2019	U.S. 2019
Limited in some way because of physical, mental or emotional problem	42%	N/A	47%	43%	37%	21%*	20%*

N/A – Not Available
**2015 BRFSS Data*

The following graphs show the percentage of Lucas County adults who were limited in some way and the most limiting health problems. Examples of how to interpret the information on the first graph include: 37% of Lucas County adults were limited in some way, including 32% of males and 44% of those ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



Healthy People 2020

Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Lucas County 2020	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	38%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
(Sources: Healthy People 2020 Objectives, 2019/2020 Lucas County Health Assessment)

Social Conditions: Social Determinants of Health

Key Findings

In 2020, 8% of Lucas County adults had to choose between paying bills and buying food. Fifteen percent (15%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime.

Healthy People 2020

- Healthy People 2020 developed five key determinants as a "place-based" organizing framework. These five determinants include:
  - Economic stability
  - Education
  - Social and community context
  - Health and health care
  - Neighborhood and built environment

Economic Stability

- Adults reported the following about their housing situation:
  - Had housing (93%)
  - Had housing, but were worried about losing housing in the future (5%)
  - Did not have housing (1%)
  - Don't know (1%)

7% of Lucas County adults, or approximately 22,870 adults experienced more than one food insecurity issue in the past year.

- Lucas County adults attempted to get assistance from the following social service agencies: Job & Family Services/JFS (11%), friend or family member (4%), food pantries (4%), Pathway (2%), place of worship (2%), WIC/health department (2%), Salvation Army (2%), free clinic (1%), United Way (1%), other charities (1%), legal aid (1%), and somewhere else (3%). Three percent (3%) did not know where to look for assistance, and 5% did not qualify for assistance.
- Adults experienced the following food insecurity issues during the past year: had to choose between paying bills and buying food (8%), worried food would run out (5%), food assistance was cut (4%), loss of income led to food insecurity issues (4%), went hungry/ate less to provide more food for their family (3%), and were hungry but did not eat because they did not have money for food (3%).
- Seven percent (7%) of adults experienced more than one food insecurity issue.
- According to the 2019 American Community Survey 1-year Estimates, the median household income in Lucas County was $49,448. The U.S. Census Bureau reports median annual income levels of $58,642 for Ohio and $65,712 for the U.S. *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*
- According to the 2019 American Community Survey 1-year Estimates, 18% of all Lucas County residents were living in poverty, and 27% of children and youth ages 0-17 were living in poverty *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*
- The unemployment rate for Lucas County was 10.6 as of July 2020 *(Source: Bureau of Labor Statistics, Local Area Unemployment Statistics).*
- According to the 2019 American Community Survey 1-year Estimates, in Lucas County, there were 203,795 housing units. The owner-occupied housing unit rate was 60%. Rent in Lucas County cost an average of $757 per month *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*

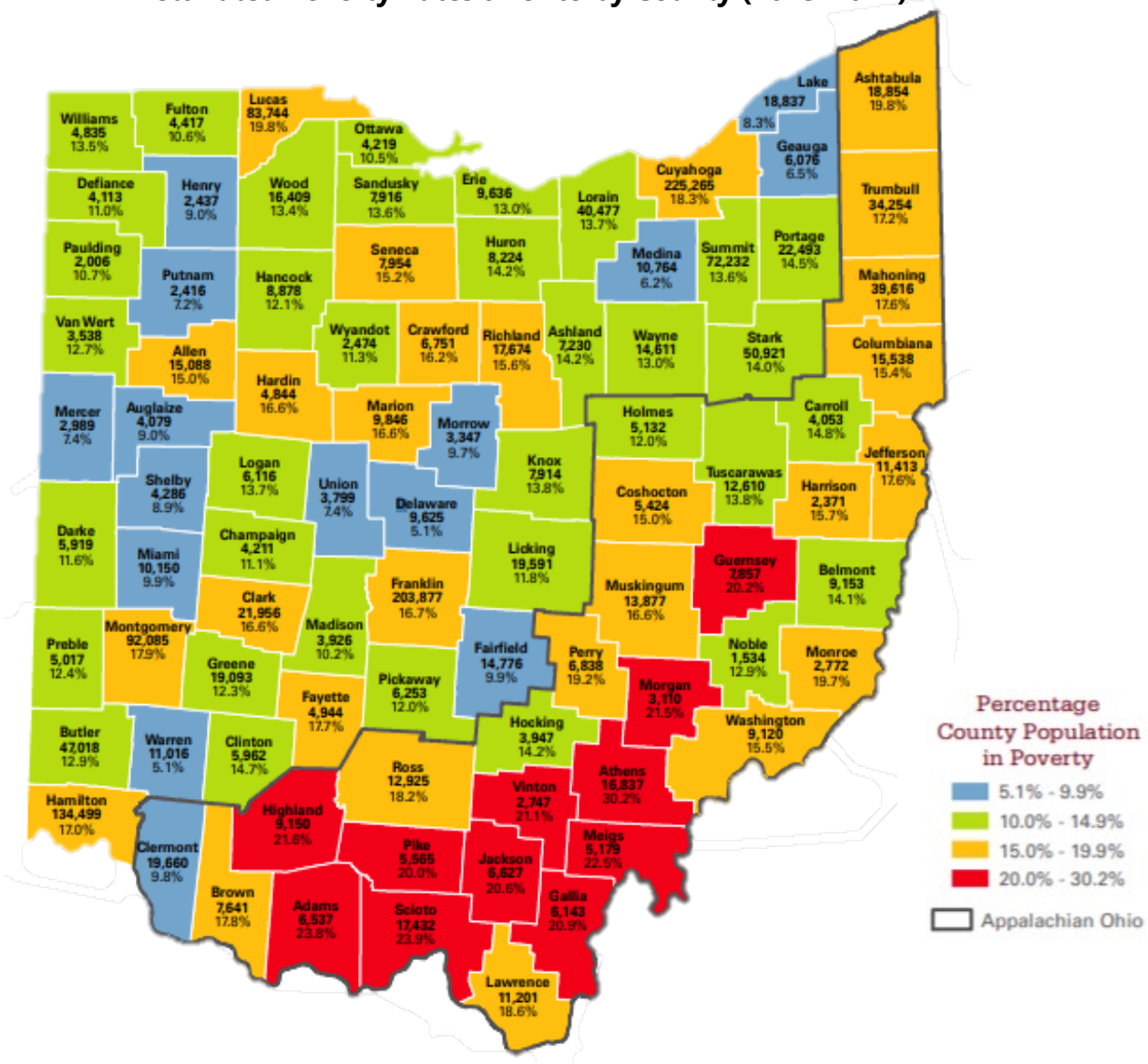
Lucas County adults and their loved ones needed the following assistance in the past year:

Type of Assistance	Received Assistance	Did Not Know Where to Look	Did Not Need Assistance
Acquiring disability benefits	9%	2%	89%
Affordable child care	<1%	4%	96%
Clothing	1%	3%	97%
Credit counseling	3%	4%	92%
Dental care	8%	3%	89%
Diapers	1%	1%	98%
Drug or alcohol addiction	2%	2%	97%
Employment	3%	2%	94%
Food	8%	2%	90%
Free tax preparation	3%	5%	93%
Gambling addiction	<1%	1%	99%
Electric, gas, or water bills	5%	3%	93%
Health care	11%	3%	86%
Home repair	3%	4%	93%
Legal aid services	1%	3%	96%
Medicare	11%	2%	87%
Mental illness issues including depression	9%	3%	88%
Post incarceration transition issues	1%	1%	98%
Prescription assistance	9%	2%	88%
Rent/mortgage	2%	4%	94%
Septic/well repairs	<1%	1%	99%
Transportation	3%	1%	95%
Unplanned pregnancy	<1%	1%	99%
Utilities	3%	3%	94%

The map below shows the variation in poverty rates across Ohio during the 2013 to 2017 period.

- The 2013 to 2017 American Community Survey 5-year estimates report that approximately 1,683,890 Ohio residents, or 14.9% of the population, were living in poverty.
- From 2013 to 2017, 19.8% of Lucas County residents were living in poverty

Estimated Poverty Rates in Ohio by County (2013-2017)



(Source: 2013-2017 American Community Survey five-year estimates, as compiled by Ohio Development Services Agency, Office of Research, Ohio Poverty Report, February 2019)

Social and Community Context

- Lucas County adults experienced the following in the past year:
  - Death of a family member or close friend (40%)
  - A close family member had to go to the hospital (35%)
  - Had bills they could not pay (15%)
  - Someone close to them had a problem with drinking or drugs (10%)
  - Someone in their household lost their job/had their hours at work reduced (10%)
  - Decline in their own health (10%)
  - Moved to a new address (8%)
  - Were a caregiver (6%)
  - Due to unforeseen circumstances, their household income was cut by 50% (4%)
  - Knew someone who lived in a hotel (4%)
  - Was threatened or abused by someone physically, emotionally, sexually, and/or verbally (4%)
  - Had someone homeless living with them or sleeping on their couch (3%)
  - Became separated or divorced (2%)
  - Was homeless (1%)
  - Had a child who was threated or abused by someone physically, emotionally, sexually, and/or verbally (1%)
  - Their family was at risk for losing their home (1%)
  - Witnessed someone in their family being hit or slapped (1%)

- Forty-five percent (45%) of Lucas County adults reported gambling in the past year. They reported the following types of gambling: lottery/scratch-offs/office pools (32%); casino gambling (17%); sports betting with a bookie/office pools (5%); poker or other card games, dice, or craps (not at a casino) (4%); bingo (3%), fantasy sports/online betting (3%); and horse/dog racing track (<1%).

- Lucas County adults reported engaging in some form of gambling:
  - Daily (1%)
  - Every few days (2%)
  - Weekly (5%)
  - Every few weeks (4%)
  - Monthly (3%)
  - Every few months (14%)
  - Once or twice a year (29%)
  - Never (43%)

- Adults experienced the following due to gambling: consumed more alcohol or drugs when gambling (1%), felt the need to lie to hide the extent of their gambling (1%), unable to pay bills (1%), gambled with larger amounts of money to get the same excitement (<1%), someone expressed a concern about their gambling (<1%), tried to cut down or stop gambling (<1%), borrowed money or relied on someone to pay their bills (<1%), lied to family members or others to hide their gambling (<1%), restless or irritable when trying to cut down or stop gambling (<1%), and jeopardized a significant relationship due to gambling (<1%).

- Fourteen percent (14%) of Lucas County adults were threatened with abuse in the past year. Those who were threatened with abuse were threatened in the past year by the following people: a spouse or partner (32%) and someone else (68%).

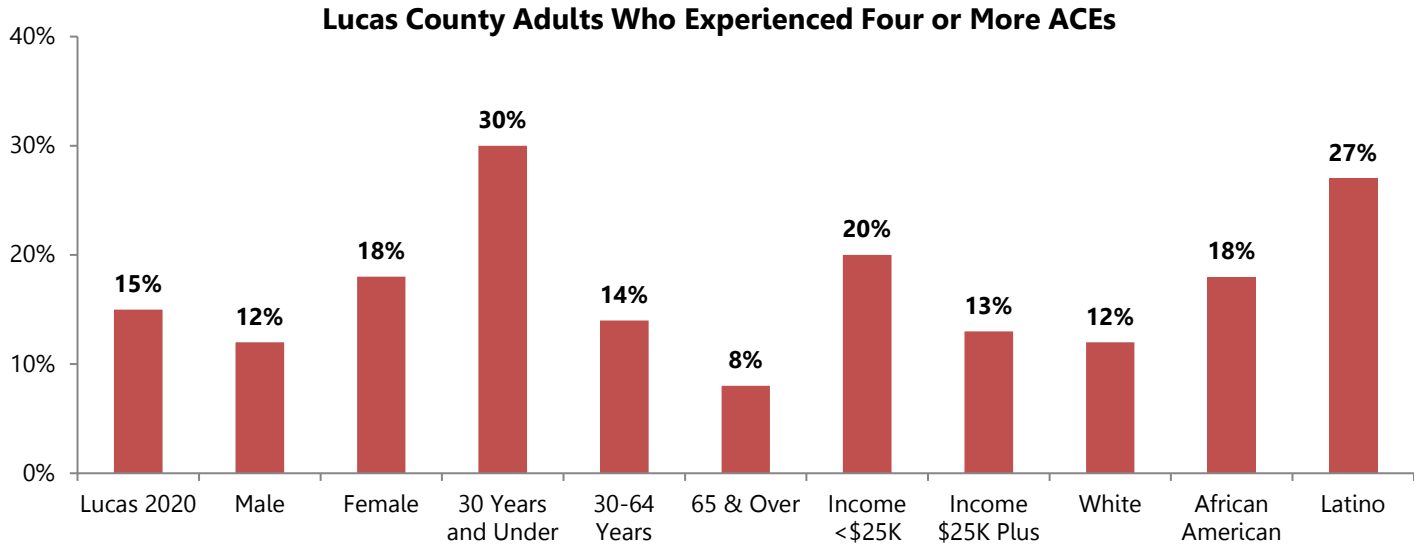
- Ten percent (10%) of Lucas County adults were abused (including physical, sexual, emotional, financial and verbal) in the past year. Those who were abused were abused in the past year by the following individuals: a spouse or partner (85%), a parent (8%), another person from outside the home (8%), and someone else (38%).

- Adverse childhood experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They also include household dysfunction such as witnessing domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development of depression, alcoholism and alcohol abuse; depression; illicit drug use; chronic obstructive pulmonary disease; suicide attempts; and many other health problems throughout a person's lifespan *(SAMHA, Adverse Childhood Experiences, Updated on July 2, 2020).*

- Lucas County adults experienced the following adverse childhood experiences (ACEs):
  - Their parents became separated or were divorced (27%)
  - Lived with someone who was a problem drinker or alcoholic (23%)
  - A parent or adult in their home swore at them, insulted them, or put them down (19%)
  - Lived with someone who was depressed, mentally ill, or suicidal (18%)
  - Someone at least five years older than them or an adult touched them sexually (13%)
  - Lived with someone who used illegal stress drugs, or who abused prescription medications (10%)
  - Their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (10%)
  - A parent or adult in their home hit, beat, kicked, or physically hurt them (9%)
  - Someone at least five years older than them or an adult tried to make them touch them sexually (8%)
  - Their family did not look out for each other, feel close to each other, or support each other (7%)
  - Their parents were not married (6%)
  - Lived with someone who served time or was sentenced to serve time in prison, jail or correctional facility (5%)
  - Someone at least five years older than them or an adult forced them to have sex (3%)
  - They didn't have enough to eat, had to wear dirty clothing, and had no one to protect them (2%)

- Fifteen percent (15%) of Lucas County adults experienced four or more adverse childhood experiences (ACEs).

The following graph shows the percentage of Lucas County adults who experienced four or more adverse child experiences (ACEs) in their lifetime. Examples of how to interpret the information on the graph include: 15% of all Lucas County adults had experienced four or more ACEs in their lifetime, including 18% of females and 30% of those ages 30 and younger.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between those who experienced four or more ACEs in their lifetime and participating in risky behaviors, as well as other experiences. An example of how to interpret the information include: 36% of those who experienced four or more ACEs seriously considered attempting suicide in the past year, compared to 5% of those who did not experience any ACEs.

Behaviors of Lucas County Adults

*Experienced four or more ACEs vs. Did Not Experience Any ACEs**

Adult Behaviors	Experienced four or more ACEs	Did Not Experience Any ACEs
Current drinker (had at least one alcoholic beverage in the past month)	48%	44%
Seriously contemplated suicide (in the past year)	36%	5%
Current smoker (currently smoke on some or all days)	30%	24%
Binge drinker (drank five or more drinks for males and four or more for females on an occasion in the past month)	29%	59%
Misused prescription drugs (used prescription drugs either not prescribed to them or used them to get high or feel more alert in the past six months)	22%	4%
Had two or more sexual partners (in the past year)	18%	1%

**ACEs indicate adults who self-reported having experienced four or more adverse childhood experiences in their lifetime.*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adverse Childhood Experiences (ACEs)

- **Adverse childhood experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years),** such as the following:
  - experiencing violence, abuse, or neglect
  - witnessing violence in the home or community
  - having a family member attempt or die by suicide
- Also included are aspects of the child's environment that can undermine their sense of safety, stability, and bonding such as growing up in a household with the following issues:
  - substance misuse
  - mental health problems
  - instability due to parental separation or household members being in jail or prison
- **ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood.** ACEs can also negatively impact education and job opportunities. However, ACEs can be prevented.
- **ACEs are common.** About 61% of adults surveyed across 25 states reported that they had experienced at least one type of ACE, and nearly 1 in 6 reported they had experienced four or more types of ACEs.
- **Preventing ACEs could potentially reduce a large number of health conditions.** For example, up to 1.9 million cases of heart disease and 21 million cases of depression could have been potentially avoided by preventing ACEs.
- **Some children are at greater risk than others.** Women and several racial/ethnic minority groups were at greater risk for having experienced 4 or more types of ACEs.
- **ACEs are costly.** The economic and social costs to families, communities, and society totals hundreds of billions of dollars each year.
- **ACEs can have lasting, negative effects on health, well-being, and opportunity.** These experiences can increase the risks of injury, sexually transmitted infections, maternal and child health problems, teen pregnancy, involvement in sex trafficking, and a wide range of chronic diseases and leading causes of death such as cancer, diabetes, heart disease, and suicide.

(Source: CDC Violence Prevention, Fast Facts, Updated April 3. 2020)

Veterans Affairs

- As a result of military service during the past 10-15 years, the following have affected Lucas County veterans' immediate family members: post-traumatic stress disorder (PTSD) (11%), access to medical care at a Veterans Affairs facility (7%), marital problems (5%), had problems getting Veterans Affairs benefits (4%), had problems getting information on Veterans Affairs eligibility and applying (4%), major health problems due to injury (3%), suicide attempt (2%), suicide completion (2%), access to mental health treatment (2%), housing issues (2%), substance/drug abuse/overdose (2%), could not find/keep a job (1%), access to medical care at a non-Veterans Affairs facility (1%), incarceration/re-entry (1%), and access to substance/drug use treatment (<1%).

Reactions to Race

- At work within the past year, 8% of Lucas County employed adults felt they were treated worse than people of other races. Fifty-eight percent (58%) felt they were treated the same at work, and 7% reported they were treated better than people of other races at work. Four percent (4%) of adults reported they were treated worse than people of some races but better than others. Four percent (4%) of adults reported they only encountered people of the same race at work.

- When seeking health care in the past year, 3% of Lucas County adults felt their experiences were worse than people of other races. Fifty-one percent (51%) felt their experiences were the same, and 7% reported their experiences were better than people of other races when seeking health care.

- Seventeen percent (17%) of Lucas County adults reported feeling emotional distress (such as anger, sadness, or frustration) or physical distress (such as a stomachache, headache, anxiety) as a result of how they were treated based on their race, ethnicity, sex, age, language, culture, religion, nationality, or sexual orientation in the past month.

- During the past month, 12% of Lucas County adults experienced physical symptoms (for example, a headache, an upset stomach, tensing of muscles, or a pounding heart) as a result of how they were treated based on their race.

- During the past month, adults felt emotionally upset as a result of how they were treated based on their:
  - Skin color (9%)
  - Ethnicity (8%)
  - Religion (5%)
  - Sexual orientation (3%)
  - Culture (3%)
  - Gender identity (2%)
  - Disability (2%)

Lucas County Adults Experiences When Seeking Health Care*

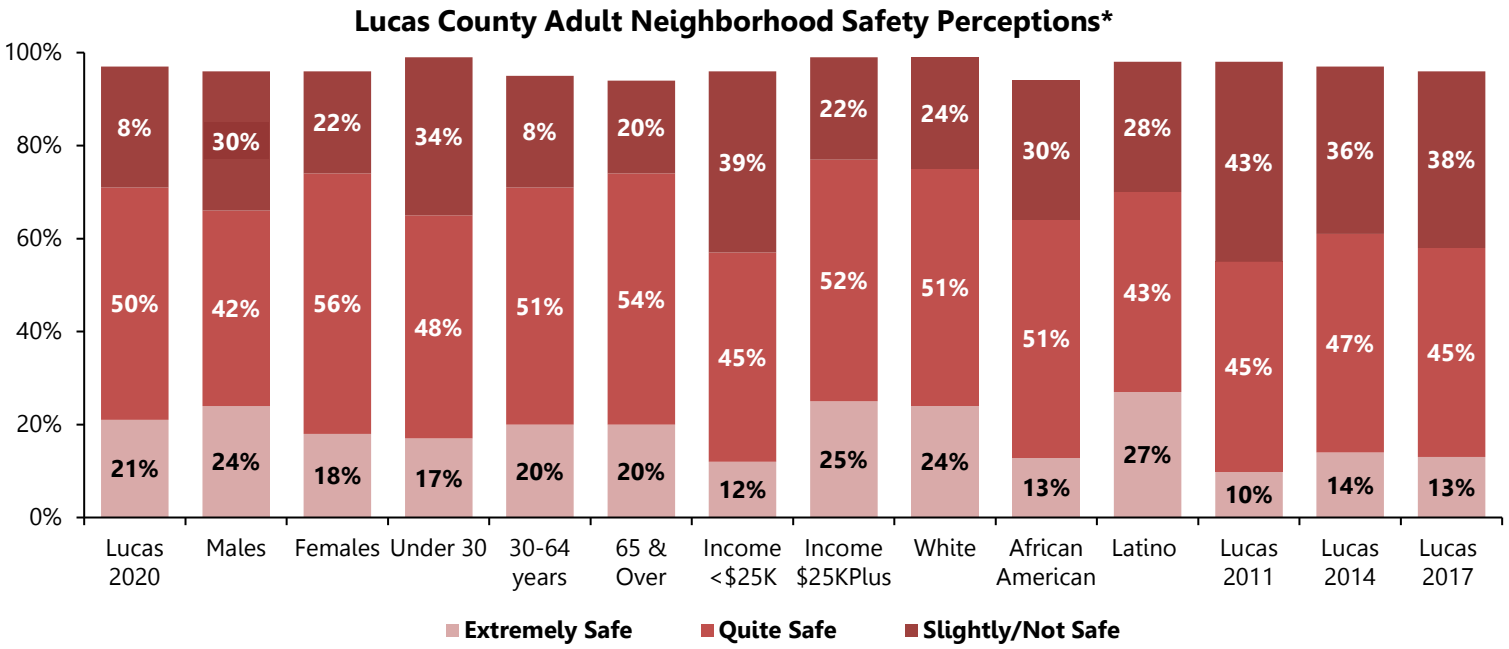
Demographics	Experiences When Seeking Health Care			
	Worse than People of Other Races	Better than People of Other Races	Same as People of Other Races	Don't Know
Total	3%	7%	51%	37%
African American	9%	0%	47%	33%
White	1%	10%	53%	34%
Latino of any race	2%	7%	57%	22%

**Percentages may not equal 100% due to the exclusion of data for those who did not have health care and answered multiple responses.*

Neighborhood and Built Environment

- Just over one-fifth (21%) of Lucas County adults reported that their neighborhood was extremely safe, 50% reported it to be quite safe, 22% reported it to be slightly safe, and 4% reported it to be not safe at all. Four percent (4%) reported that they did not know how safe from crime their neighborhood was.

The following graph shows the percentage of Lucas County adults who described their neighborhood as extremely safe, quite safe and slightly/not safe. Examples of how to interpret the information include: 21% of all Lucas County adults described their neighborhood as extremely safe, including 24% of males and 12% of those with annual incomes less than $25,000.



**Respondents were asked: "How safe from crime do you consider your neighborhood to be?"*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

- Seventy percent (70%) of Lucas County adults reported deliberately testing all of the smoke detectors in their home within the past year. Nine percent (9%) have never tested the smoke detectors in their home. Four percent (4%) of adults reported no smoke detectors in their home.

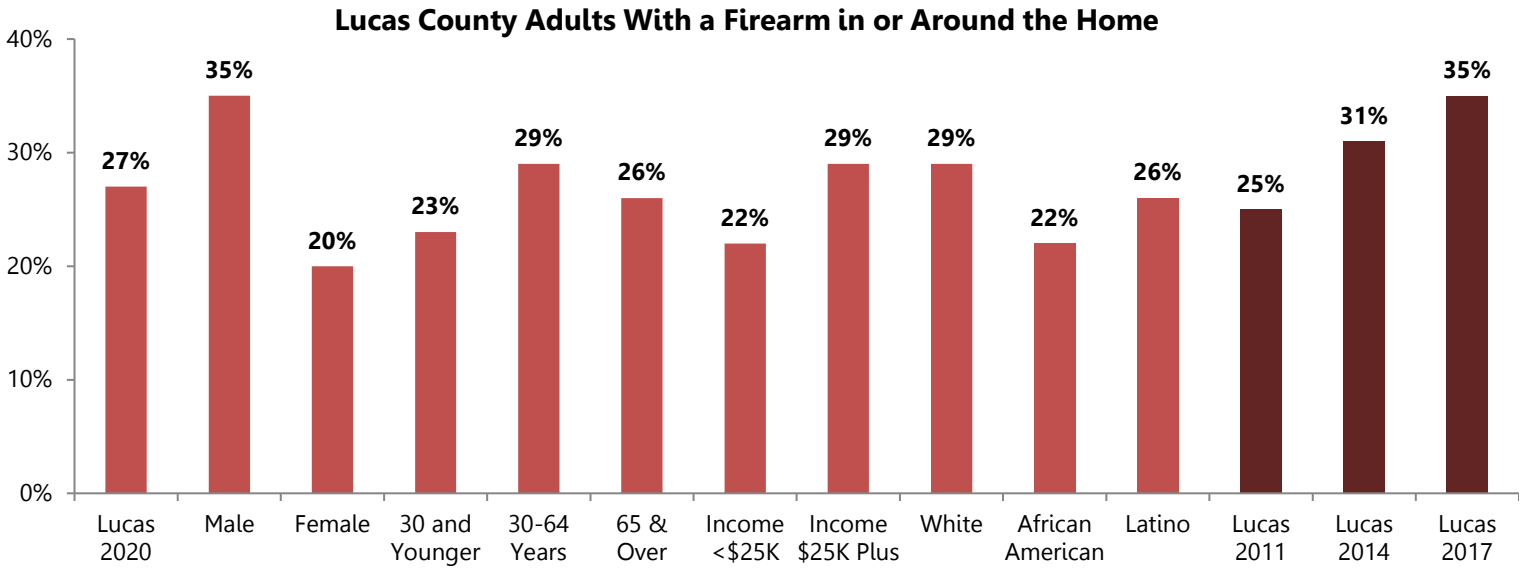
- Twenty-eight percent (28%) of Lucas County adults reported the following transportation issues: no car (20%), no driver's license/suspended license (11%), limited public transportation available or accessible (5%), no car insurance (5%), cost of public or private transportation (5%), did not feel safe to drive (4%), other car issues/expenses (4%), disabled (2%), no public transportation available or accessible (1%), and could not afford gas (1%). Eighteen percent (18%) of adults who reported having transportation issues had more than one issue.

- Lucas County adults indicated they use the following forms of transportation regularly: vehicle or family vehicle (85%), ride from a friend or family member (22%), walk (11%), public transportation (9%), bike (3%), and other (9%).

- Lucas County adults reported doing the following while driving: talking on hand-held cell phone (52%); eating (35%); texting (29%); using cell phone other than for talking or texting (20%), using Internet/apps/social media on their cell phone (16%); driving without wearing a seatbelt (14%); being under the influence of alcohol (5%); reading (4%); being under the influence of prescription drugs (3%); being under the influence of recreational drugs (3%); and other activities (such as applying makeup, shaving, etc.) (3%). Forty-two percent (42%) of adults had more than one distraction. Eight percent (8%) of adults reported they did not drive.
- More than one-fourth (27%) of Lucas County adults kept a firearm in or around their home. Four percent (4%) of adults reported that their firearms were unlocked and loaded.

- Adults with firearms in or around their home reported the following reasons for having them: protection (84%), hunting or sport (3%), and other reasons (6%).

The following graph shows the percentage of Lucas County adults that have a firearm in or around the home. Examples of how to interpret the information include: 27% of all Lucas County adults had a firearm in or around the home, including 35% of males and 29% of those with annual incomes of $25,000 or more.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Victims of Gun Violence in America

- Every year, 114,328 people are shot in murders, assaults, suicides & suicide attempts, accidents or by police intervention in America in an average year.
  - 37,603 people die from gun violence and 76,725 people survive gun injuries.
- Every day, an average of 313 persons are shot in America. Of those 313 people, 103 people die and 210 are shot, but survive.
  - Of the 310 people who are shot every day, an average of 21 are children and teens.
  - Of the 103 people who die, 63 are suicides, one death is unintentional, one is by legal intervention, and one with an unknown intent.
  - Of the 210 people who are shot but survive, 95 are assaulted, 90 are shot accidently, ten are suicide attempts, four are legal interventions and 12 are shot with an unknown intent.

(Source: Brady Campaign to Prevent Gun Violence, Fact Sheet, Updated on August 2020)

Social Conditions: Environmental Conditions

Key Findings

Lucas County adults reported the following as the top four issues that threatened their health in the past year: bed bugs (8%), mold (8%), insects (7%), and rodents (6%). Ten percent (10%) of adults reported they had a disaster plan in preparation of a disaster.

8% of Lucas County adults, or approximately 3,391 adults reported that bed bugs threatened their or their family members' health in the past year.

Environmental Health

- Lucas County adults thought the following threatened their or their family members' health in the past year:
  - Bed bugs (8%)
  - Mold (8%)
  - Insects (7%)
  - Rodents (6%)
  - Safety hazards (structural problems) (5%)
  - Plumbing problems (5%)
  - Air quality (4%)
  - Temperature regulation (heating and air conditioning) (3%)
  - Cockroaches (2%)
  - Unsafe water supply/wells (2%)
  - Sewage/wastewater problems (2%)
  - Moisture issues (2%)
  - Radon (1%)
  - Lice (1%)
  - Chemicals found in household products (1%)
  - Food safety/foodborne illness (1%)
- Fifteen percent (15%) of Lucas County adults reported more than one environmental issue that threatened their or their family members' health in the past year.

Disaster Preparedness

- Lucas County households had the following disaster preparedness supplies: cell phone (86%), working smoke detector (77%), working flashlight and working batteries (73%), computer/tablet (73%), three-day supply of nonperishable food for everyone in the household (51%), three-day supply of prescription medication for each person who takes prescribed medicines (49%), working carbon monoxide detector (48%), three-day supply of water for everyone in the household (one gallon of water per person per day) (38%), working battery-operated radio and working batteries (33%), home land-line telephone (30%), communication plan (25%), generator (10%), and disaster plan (8%).

- Eighty-eight percent (88%) of Lucas County adults reported having more than one disaster preparedness supply. Eleven percent (11%) reported having none of the above disaster preparedness supplies.

Mold Prevention Tips

- Exposure to damp and moldy environments may cause a variety of health effects. Some people are sensitive to molds. For these people, exposure to molds can lead to symptoms such as stuffy nose, wheezing, and red or itchy eyes, or skin. Some people, such as those with allergies to molds or with asthma, may have more intense reactions.
- In your home, you can control mold growth by:
  - Keeping humidity levels as low as you can, no higher than 50%, all day long.
  - Making sure your home has enough ventilation. Use exhaust fans which vent outside your home in the kitchen and bathroom. Make sure your clothes dryer vents outside your home.
  - Fixing any leaks in your home's roof, walls, or plumbing so mold does not have moisture to grow.
  - Not using carpet in rooms or areas like bathrooms or basements that may have a lot of moisture.

(Source: CDC, Basic Facts about Mold and Dampness, Updated August 11, 2020)

Health Care Access: African American Health Care Coverage

Key Findings

In 2020, 11% of Lucas County African American adults were without health care coverage. Those most likely to be uninsured were females and those with annual incomes less than $25,000.

In Lucas County, 11% of African American adults were uninsured.

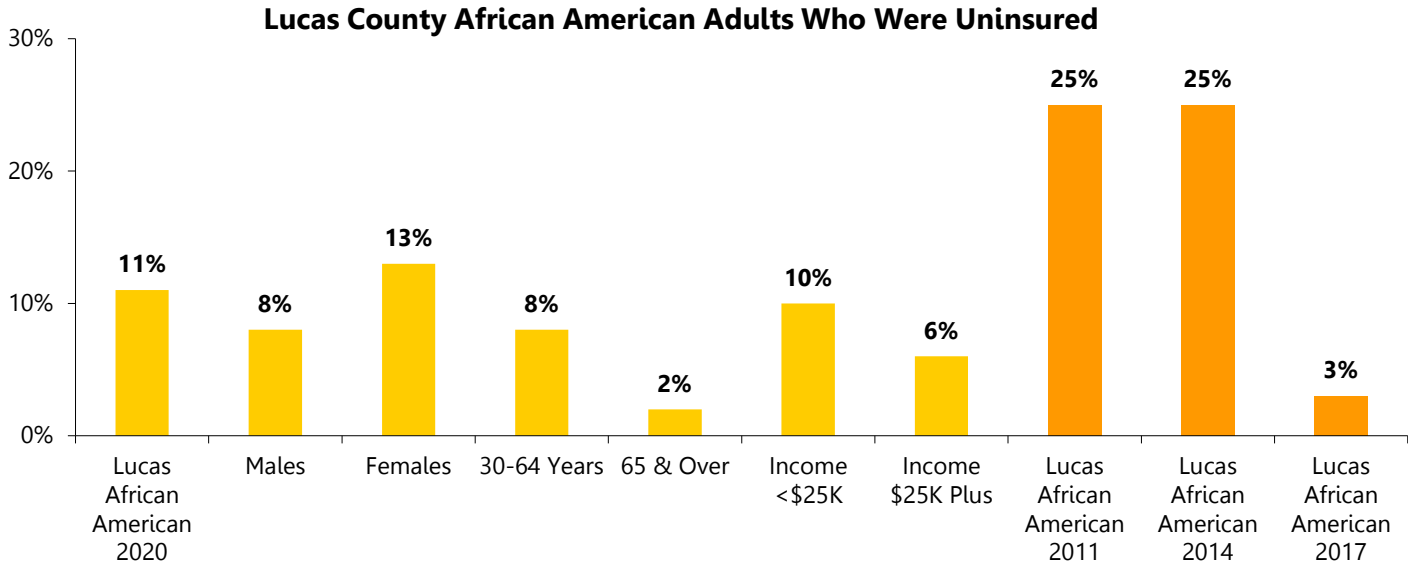
Health Care Coverage

- In 2020, 89% of Lucas County African American adults had health care coverage, and 11% were uninsured.
- Seventeen percent (17%) of Lucas County African American adults with children did not have health care coverage, compared to 7% of those who did not have children living in their household.
- The following reasons were cited by uninsured Lucas County African American adults as reasons for being without health care coverage:
  1. Became a part time or temporary employee (28%)
  2. Cost (28%)
  3. Lost their jobs or changed employers (18%)
  4. Do not think they needed it (13%)

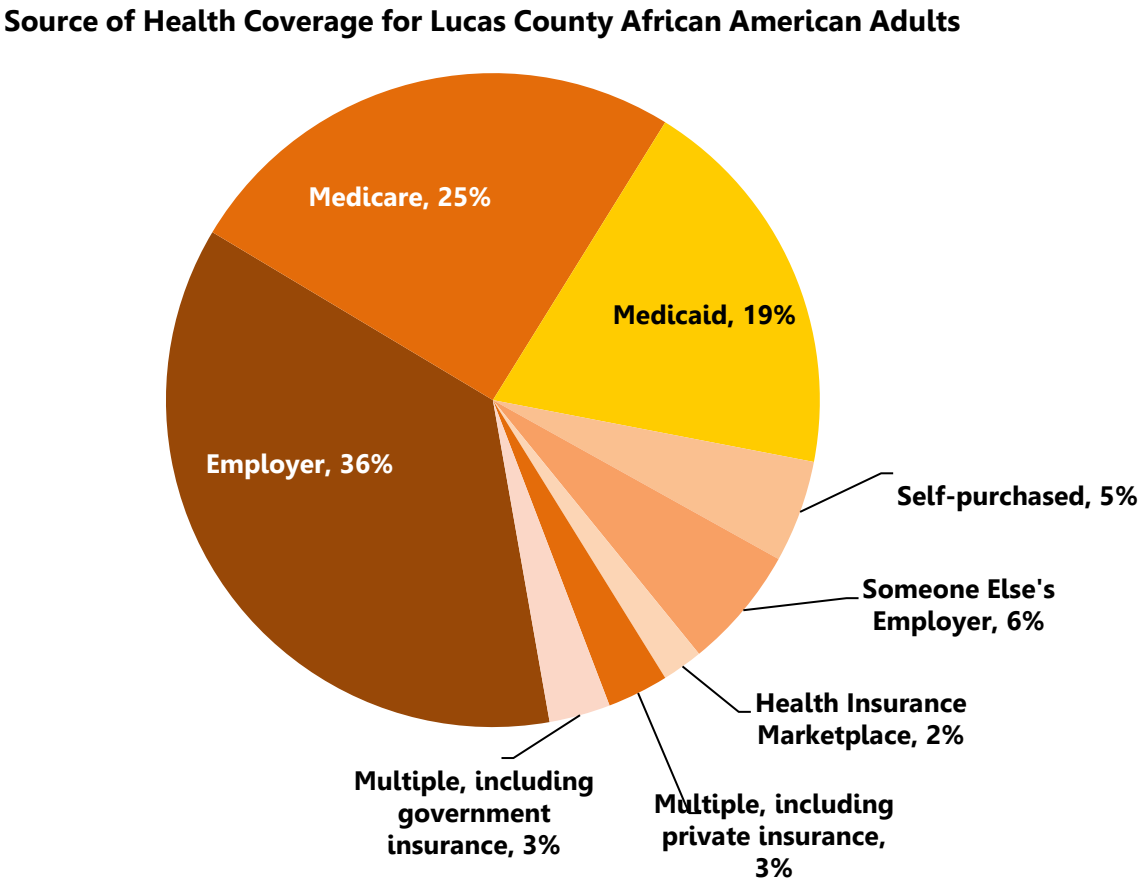
  (Percentages do not equal 100% because respondents could select more than one reason)
- The following types of health care coverage were used: employer (36%); Medicare (25%); Medicaid or medical assistance (19%); someone else's employer (6%); self-purchased plan (5%); multiple, including government insurance (3%); multiple, including private insurance (3%); and Health Insurance Marketplace (2%).
- Lucas County African American adults had the following issues regarding their health care coverage:
  - Cost (32%)
  - Opted out of certain coverage because they could not afford it (11%)
  - Could not understand their insurance plan (9%)
  - Provider was no longer covered (6%)
  - Service no longer covered (6%)
  - Limited visits (5%)
  - Service not deemed medically necessary (3%)
  - Working with their insurance company (2%)
  - Pre-existing conditions (2%)
  - Opted out of certain coverage because they did not need it (2%)

Adult Comparisons	Lucas County African American 2007	Lucas County African American 2011	Lucas County African American 2014	Lucas County African American 2017	Lucas County African American 2020	Ohio African American 2018	U.S. African American 2018
Uninsured	12%	25%	25%	3%	11%	10%	14%

The following graph shows the percentage of Lucas County African American adults who were uninsured. An example of how to interpret the information includes: 11% of all Lucas County African American adults were uninsured, including 10% of African American adults with annual incomes less than $25,000 and 2% of those older than the age of 65. The pie chart shows sources of Lucas County African American adults' health care coverage.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



The following chart shows what is included in Lucas County African American adults' insurance coverage.

Health Coverage Includes:	Yes	No	Don't Know
Medical	97%	2%	1%
Prescription Coverage	93%	4%	3%
Preventive Health (e.g., well visits, cancer screenings, blood pressure tests)	87%	4%	9%
Outpatient Therapy (e.g., occupational therapy, physical therapy)	86%	2%	12%
Immunizations	84%	4%	12%
Dental	84%	15%	1%
Vision/Eyeglasses	83%	13%	4%
Mental Health	67%	4%	29%
Durable Medical Equipment (e.g., canes, walkers, oxygen)	50%	10%	40%
Alcohol and Drug Treatment	48%	10%	42%
Transportation	44%	15%	41%
Home Care	41%	9%	50%
Skilled Nursing/Assisted Living (e.g., inpatient rehab/therapy)	40%	8%	52%
Hospice	33%	10%	57%

Healthy People 2020
Access to Health Services (AHS)*

Objective	Lucas County African Americans 2020	Ohio 2018*	U.S. 2018*	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health insurance	100% age 18-24 67% age 25-34 92% age 35-44 92% age 45-54 88% age 55-64	90% age 18-24 89% age 25-34 91% age 35-44 94% age 45-54 94% age 55-64	85% age 18-24 84% age 25-34 87% age 35-44 90% age 45-54 93% age 55-64	100%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
(Sources: Healthy People 2020 Objectives, 2018 BRFSS, 2019/2020 Lucas County Health Assessment)
**Ohio/U.S. percentages, and Healthy People 2020 targets are not race specific*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey

Health Care Access: African American Access and Utilization

Key Findings

One-fifth (20%) of African American adults did not get their prescriptions from their doctors filled in the past year. Twenty-one percent (21%) of African American adults looked for a program to help with depression, anxiety, or some mental health problem.

During the past year, 13% African American adults did not receive medical care due to cost/no insurance.

Health Care Access and Utilization

- In 2020, African American adults usually visited the following places for health care services when they were sick or needed advice:
  - Doctor's office (87%)
  - Urgent care center (35%)
  - Hospital emergency room (35%)
  - Family and friends (18%)
  - Internet (15%)
  - Called 9-1-1/used an ambulance service (8%)
  - In-store health clinic (6%)
  - Community health center (4%)
  - Chiropractor (3%)
  - Alternative therapies (2%)
  - Veterans Affairs (VA) (2%)
  - Telemedicine (2%)
  - Some other place (2%)
  - Three percent (3%) of African American adults indicated they had no usual place for health care services.

- The following prevented Lucas County African American adults from getting medical care in the past year: no need to go (38%), cost/no insurance (13%), doctor would not take their insurance (3%), too embarrassed to seek help (3%), no transportation (3%), office was not open when they could get there (3%), too long of a wait for an appointment (3%), and some other reason (18%).

- Lucas County African American adults went outside of Lucas County for health care services for the following reasons: service was not available locally (1%), had a bad experience locally (1%), and other (4%).

- One-fifth (20%) of Lucas County African American adults did not get their prescriptions from their doctors filled in the past year for the following reasons: too expensive (52%), did not think they needed it (48%), no insurance (28%), they did not have any prescriptions to be filled (20%), side effects (16%), no generic equivalent of what was prescribed (16%), stretched current prescription by taking less than what was prescribed (12%), and fear of addiction (8%).

- A living will is a written legal document that details adults' wishes for end-of-life medical care if they are unable to make decisions for themselves. Thirteen percent (13%) of Lucas County African American adults reported they had a living will, increasing to 18% of those with annual incomes less than $25,000 and increasing to 31% of those older than the age of 65.

- A durable power of attorney is a written legal document in which people name an individual who will make medical decisions for them when they are unable to do so. Ten percent (10%) of Lucas County African American adults had a durable power of attorney, increasing to 19% of those over the age of 65.

- Of the Lucas County African American adults who did not have a living will or durable power of attorney, 38% had discussed their medical wishes with a family member or loved one.

Availability of Services

Lucas County African American Adults Able to Access Assistance Programs/Services

Types of Programs (% of all African American adults who looked for the programs)	Lucas County African American adults who have looked but have NOT found a specific program	Lucas County African American adults who have looked and have found a specific program
Depression, anxiety, or some mental health problem (21% of all adults looked)	41%	59%
Weight problem (16% of all adults looked)	55%	45%
Disability (13% of all adults looked)	25%	75%
Assist in care for the elderly (either in-home or out-of-home, or adult day care) (7% of all adults looked)	25%	75%
Assistance with in-home care for an elderly or disabled adult (7% of all adults looked)	22%	78%
Tobacco cessation (6% of all adults looked)	75%	25%
Assist in care for the disabled (either in-home or out-of-home) (6% of all adults looked)	14%	86%
Disabled adult program (5% of all adults looked)	50%	50%
Alcohol abuse (5% of all adults looked)	17%	83%
Assistance with out-of-home placement for an elderly or disabled adult (5% of all adults looked)	17%	83%
End-of-life care or hospice care (5% of all adults looked)	17%	83%
Day care for an elderly or disabled adult (4% of all adults looked)	60%	40%
Detoxification for opiates/heroin (4% of all adults looked)	20%	80%
Drug abuse (4% of all adults looked)	20%	80%
Assisted living program for an elderly or disabled adult (3% of all adults looked)	50%	50%
Cancer support group/counseling (3% of all adults looked)	50%	50%
Family planning (3% of all adults looked)	50%	50%
Marital or family problems (2% of all adults looked)	33%	67%
Gambling abuse (1% of all adults looked)	100%	0%

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Care Access: African American Preventive Medicine

Key Findings

More than half (55%) of Lucas County African American adults had a flu vaccine during the past year. More than two-thirds (70%) of African American adults ages 65 and older had a pneumonia vaccination at some time in their life.

Preventive Medicine

- More than half (55%) of Lucas County African American adults had a flu vaccine during the past year, increasing to 76% of those 65 and older.
- More than one-third (37%) of African American adults have had a pneumonia shot in their life, increasing to 70% of those ages 65 and over.
- Lucas County African American adults have had the following vaccines:
  - Measles, mumps, and rubella (MMR) in their lifetime (73%)
  - Chicken pox in their lifetime (72%)
  - Tetanus booster (Td/Tdap) in the past ten years (62%)
  - Hepatitis B vaccine in their lifetime (36%)
  - Hepatitis A vaccine in their lifetime (34%)
  - Zoster (shingles) vaccine in their lifetime (23%)
  - Influenza type B vaccine in their lifetime (22%)
  - Meningococcal vaccine in their lifetime (22%)
  - Human papillomavirus (HPV) vaccine in their lifetime (18%)

Preventive Health Screenings and Exams

- In the past year, 55% of Lucas County African American women ages 40 and older had a mammogram.
- In the past year, 28% of African American men ages 50 and older had a digital rectal exam.
- See the Women's and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Lucas County African American adults.

Lucas County African American Adult Health Screening Results

General Screening Results	Total Sample*
Diagnosed with High Blood Pressure	55%
Diagnosed with High Blood Cholesterol	31%
Diagnosed with Diabetes	15%
Survived a Heart Attack	5%
Survived a Stroke	4%

**Percentages based on all Lucas County African American adults surveyed.*

Health Care Topics Discussed by Lucas County African American Adults With Their Health Care Professional in the Past Year

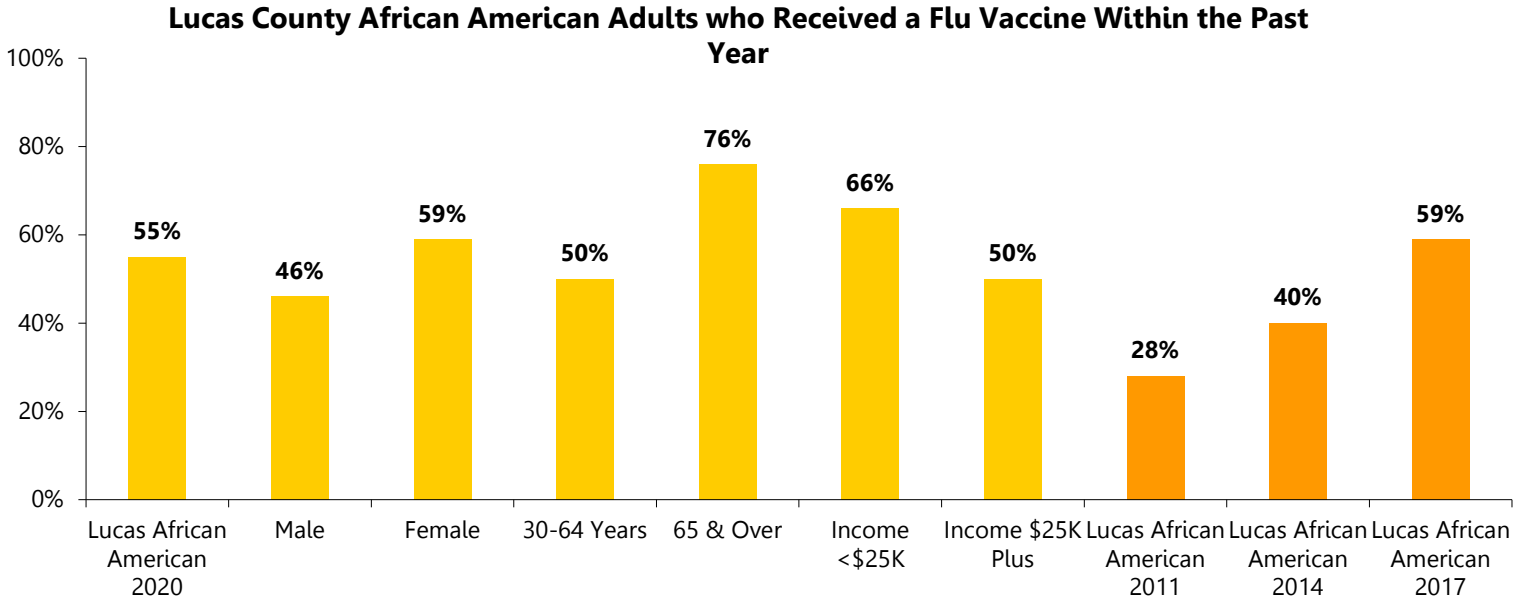
Health Care Topics	Total 2017	Total 2020
Alcohol use	3%	13%
Child care	N/A	4%
Depression, anxiety, or emotional problems	21%	30%
Domestic violence	2%	3%
Drug abuse	3%	9%
E-cigarettes/vaping	N/A	4%
Education	N/A	7%
Family history	21%	32%
Family planning	7%	12%
Financial strains	N/A	7%
Food access	N/A	11%
Housing	N/A	7%
Immunizations	22%	24%
Injury prevention (e.g., safety belt use, helmet use & smoke detectors)	7%	14%
Safe use of opiate-based pain medication (e.g., Percocet, Vicodin)	7%	14%
Safe use of prescription medication	20%	26%
Sexually transmitted diseases (STDs)	4%	12%
Social connections	N/A	9%
Tobacco use	14%	19%
Training and employment	N/A	6%
Transportation	N/A	7%
Utilities	N/A	5%
Weight control (e.g., diet, physical activity)	38%	33%

N/A – Not Available

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Ever had a pneumonia vaccine in lifetime (ages 65 and older)	44%	55%	51%	71%	70%	69%	60%
Had a flu vaccine in the past year	28%	28%	40%	59%	55%	31%	28%
Had a flu vaccine in the past year (ages 65 and older)	46%	67%	55%	73%	76%	52%	47%
Ever had a shingles or zoster vaccine	N/A	N/A	N/A	12%	23%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Lucas County African American adults who received a flu vaccine within the past year. Examples of how to interpret the information shown on the graph include: 55% of Lucas County African American adults received a flu vaccine within the past year, including 59% of African American females and 66% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Healthy People 2020
Immunization and Infectious Diseases (IID)*

Objective	Lucas County African Americans 2020	Healthy People 2020 Target
IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	70%	90%
IID-12.7: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated annually against seasonal influenza	76%	90%
IID-14: Increase the percentage of adults who are vaccinated against zoster (shingles)	23%	30%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
**Healthy People target is not race specific*
(Sources: Healthy People 2020 Objectives, 2019/2020 Lucas County Health Assessment)

Health Care Access: African American Women's Health

Key Findings

In 2020, over half (55%) of Lucas County African American women older than the age of 40 reported having a mammogram. Sixty-one percent (61%) of Lucas County African American women had a clinical breast exam, and 44% had a Pap smear to detect cancer of the cervix, in the past year. More than half (53%) had high blood pressure, 44% were obese, 30% had high blood cholesterol, and 22% were identified as current smokers, all known risk factors for cardiovascular diseases.

Lucas County African American Female Leading Causes of Death, 2016 – 2018
Total Lucas County African American Female Deaths: 1,199

1. Heart Diseases (24% of all deaths)
2. Cancers (21%)
3. Stroke (7%)
4. Alzheimer's Disease (5%)
5. Accidents, Unintentional Injuries (5%)

(Source: Ohio Public Health Warehouse, 2016-2018)

Ohio African American Female Leading Causes of Death, 2016 – 2018
Total Ohio African American Female Deaths: 20,100

1. Heart Diseases (22% of all deaths)
2. Cancers (21%)
3. Stroke (6%)
4. Accidents, Unintentional Injuries (4%)
5. Diabetes (4%)

(Source: Ohio Public Health Warehouse, 2016-2018)

Women's Health Screenings

- More than three-fourths (77%) of Lucas County African American women had a mammogram at some time in their life, and almost half (48%) had this screening in the past year.
- More than half (55%) of Lucas County African American women ages 40 and older had a mammogram in the past year, and 76% had one in the past two years.
- Most (94%) Lucas County African American women had a clinical breast exam at some time in their life, and 61% had one within the past year. More than three-fifths (68%) of African American women ages 40 and older had a clinical breast exam in the past two years.
- Ninety-nine percent (99%) of Lucas County African American women had a Pap smear at some time in their life, and 44% reported having had the exam in the past year. Seventy percent (70%) of African American women had a Pap smear in the past three years. Ten percent (10%) African American women reported the screening was not recommended by their doctor.

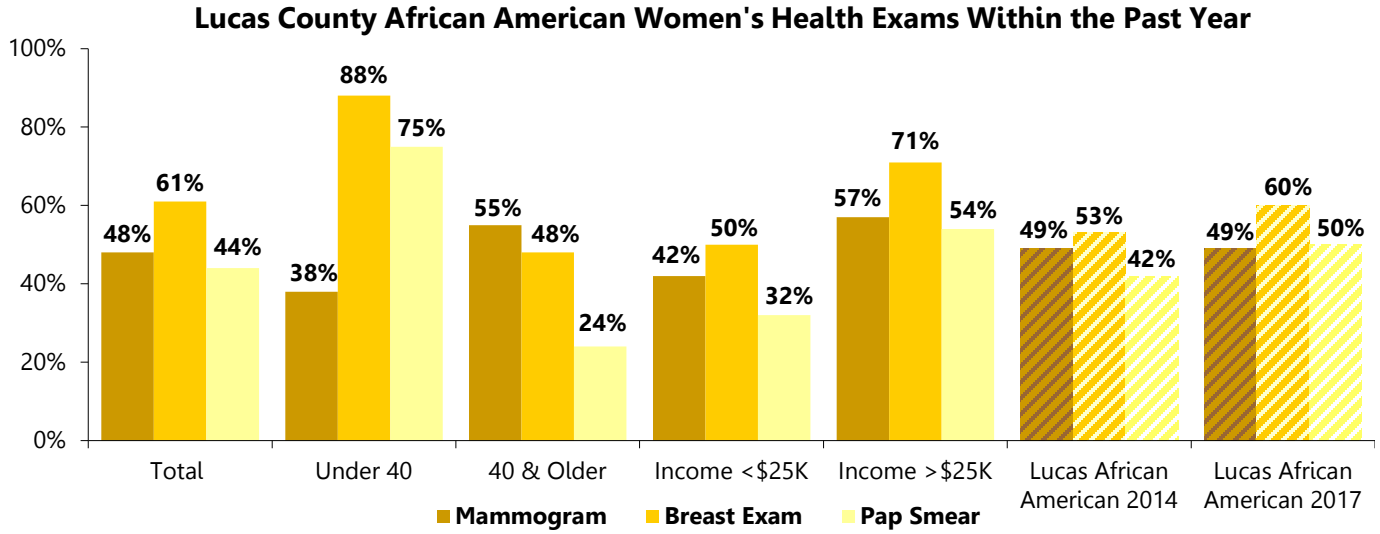
Pregnancy

- Fifteen percent (15%) of Lucas County African American women had been pregnant in the past five years.
- Thinking back to their last pregnancy, 64% of Lucas County African American women did not want to be pregnant then or any time in the future, 27% wanted to be pregnant then, and 9% did not recall.

Women's Health Concerns

- Lucas County African American women used the following as their usual source of services for female health concerns: private gynecologist (44%), general or family physician (35%), family planning clinic (4%), and emergency room (1%). Twelve percent (12%) of African American women indicated they did not have a usual source of services for female health concerns.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In 2020, the health assessment identified that:
  - 82% of African American women were overweight or obese
  - 53% of African American women were diagnosed with high blood pressure
  - 30% of African American women were diagnosed with high blood cholesterol
  - 22% of African American women were current smokers
  - 15% of African American women had been diagnosed with diabetes

The following graph shows the percentage of Lucas County African American women that had various health exams in the past year. An example of how to interpret the information includes: 48% of Lucas County African American females had a mammogram within the past year, 61% had a clinical breast exam, and 44% had a Pap smear.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Had a clinical breast exam in the past two years (ages 40 and older)	78%	79%	74%	81%	68%	83%	N/A
Had a mammogram within the past two years (ages 40 and older)	78%	76%	79%	80%	76%	81%	78%
Had a Pap smear in the past three years (ages 21-65)	N/A	N/A	78%*	77%*	77%	N/A	85%

N/A – Not Available
**Previous Lucas County trend data included women of all ages*

Cancer Disparities Among African American Women

Cancer affects all population groups in the United States, but certain groups may bear a disproportionate burden of cancer compared with other groups. Although cancer incidence and mortality overall are declining in all racial/ethnic groups in the United States, certain groups continue to be at increased risk of developing or dying from particular cancers. For example:

- African American women are much more likely than white women to die of breast cancer, and the mortality gap is widening. In the past, the incidence rate of breast cancer in African American women was lower in white women, but it has now caught up.
- African American women are nearly twice as likely as white women to be diagnosed with triple-negative breast cancer, which is more aggressive and harder to treat than other subtypes of breast cancer.

(Source: National Cancer Institute, Cancer Disparities, March 11, 2019)

Health Care Access: African American Men's Health

Key Findings

More than three fourths (76%) of Lucas County African American men had a digital rectal exam in their lifetime, and 22% had one in the past year. More than half (57%) of Lucas County African American men had been diagnosed with high blood pressure, 31% had high blood cholesterol, and 18% were identified as smokers, which, along with obesity (43%), which are all known risk factors for cardiovascular diseases.

Lucas County African American Male Leading Causes of Death, 2016 – 2018
Total Lucas County Male Deaths: 1,344

1. Heart Diseases (25% of all deaths)
2. Cancers (21%)
3. Accidents, Unintentional Injuries (8%)
4. Diabetes (5%)
5. Assault, Homicide (5%)

(Source: Ohio Public Health Warehouse, 2016-2018)

Ohio African American Male Leading Causes of Death, 2016 – 2018
Total Ohio Male Deaths: 21,840

1. Heart Diseases (22% of all deaths)
2. Cancers (20%)
3. Accidents, Unintentional Injuries (9%)
4. Assault, Homicide (6%)
5. Diabetes (5%)

(Source: Ohio Public Health Warehouse, 2016-2018)

Men's Health Screenings

- More than three-fourths (76%) of Lucas County African American men had a digital rectal exam in their lifetime, and 22% had one in the past year.

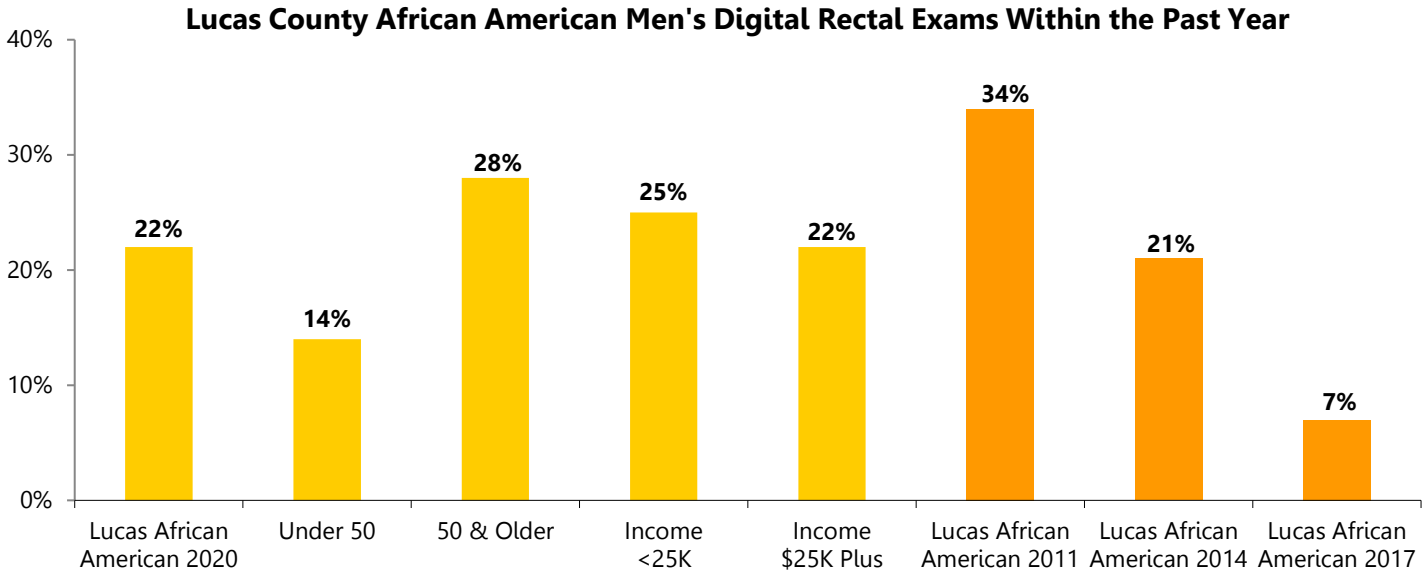
Men's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In 2020, the health assessment identified that:
  - 74% of Lucas County African American men were overweight or obese
  - 57% of Lucas County African American men were diagnosed with high blood pressure
  - 31% of Lucas County African American men diagnosed with high blood cholesterol
  - 18% of Lucas County African American men were current smokers
  - 16% of Lucas County African American men had been diagnosed with diabetes

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Had a digital rectal exam within the past year	37%	34%	21%	7%	22%	N/A	N/A

N/A – Not Available

The following graphs show the percentage of Lucas County African American males that had digital rectal exams in the past year. Examples of how to interpret the information include: 22% of Lucas County African American males had a digital rectal exam within the past year, including 28% of those aged 50 and older and 25% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

American Cancer Society Recommendations for Prostate Cancer Early Detection

The American Cancer Society recommends that men have a chance to make informed decisions with their health care provider about being screened for prostate cancer. The decision should be made after getting information about risks and benefits of prostate cancer screenings. Men should not be screened unless they have received this information.

Men at high risk of developing prostate cancer (Black men and those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at 40.

After this discussion, men who want to be screened should get the prostate-specific antigen (PSA) blood test. The digital rectal exam may also be done as a part of screening.

(Source: American Cancer Society, Recommendations for Prostate Cancer Early Detection, 2020)

Health Care Access: Oral Health

Key Findings

Forty-four percent (44%) of Lucas County African American adults visited a dentist or dental clinic in the past year. Eleven percent (11%) of African American adults did not see a dentist in the past year due to cost.

During the past year, 44% of Lucas County African American adults visited a dentist or dental clinic.

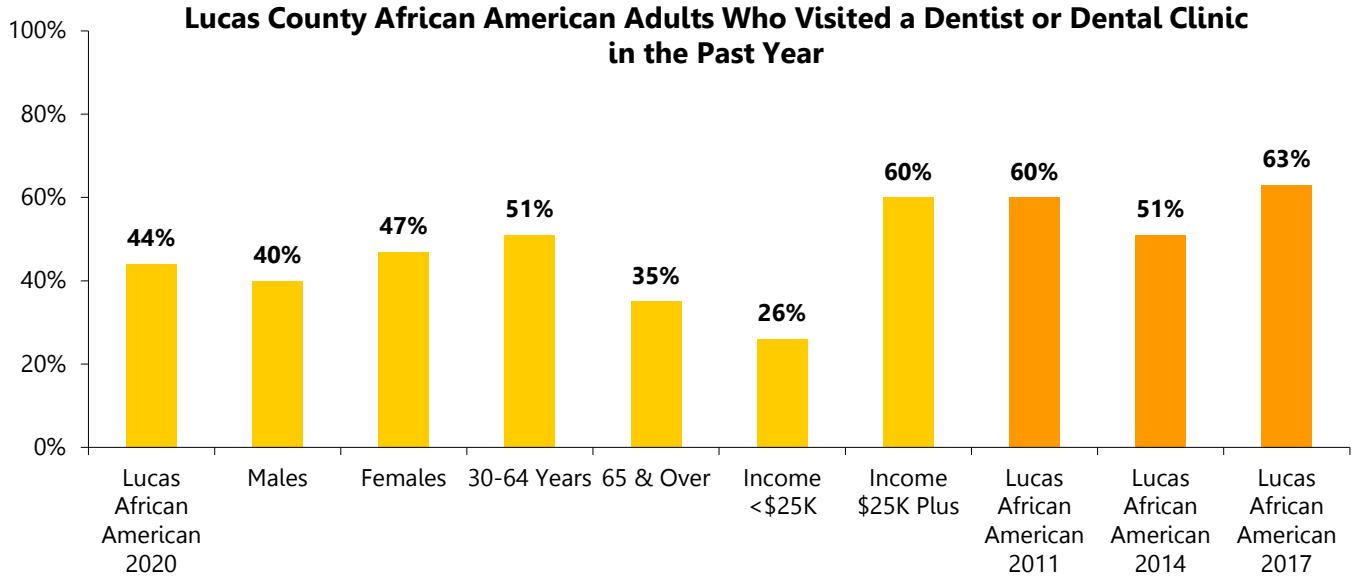
Oral Health

- In the past year, 44% of Lucas County African American adults had visited a dentist or dental clinic, decreasing to 26% of those with annual incomes less than $25,000.
- Forty-three percent (43%) of Lucas County African American adults with dental insurance had been to the dentist in the past year, compared to 10% of those without dental insurance.
- Lucas County African American adults reported the following reasons for not visiting a dentist in the last year:
  - Fear, apprehension, nervousness, pain, and dislike going (19%)
  - Had dentures (16%)
  - No reason to go/had not thought of it (14%)
  - Cost (11%)
  - Did not have/know a dentist (4%)
  - Transportation (2%)
  - Could not find a dentist taking Medicaid patients (1%)
  - Other reasons (11%)
- Lucas County African American adults completed the following oral health habits daily: brushed their teeth (94%), used mouth wash (57%), and flossed their teeth (52%).
- Lucas County African American adults had the following oral health issues: pain (11%), difficulty eating/chewing (10%), loose teeth (8%), problems with dentures (7%), no teeth (7%), oral bleeding (6%), skipped meals due to pain (5%), missed work due to mouth pain (5%), and other (17%). Sixteen percent (16%) of adults reported experiencing two or more oral health issues.

African American Adult Oral Health	Within the Past Year	Within the Past Two Years	Within the Past Five Years	Five or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	40%	25%	8%	10%	0%
Females	47%	26%	11%	10%	1%
Total	44%	26%	10%	11%	1%

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Visited a dentist in the past year	55%	60%	51%	63%	44%	64%	61%

The following graph provides information about the frequency of Lucas County African American adult dental visits. Examples of how to interpret the information include: 44% of Lucas County African American adults had been to the dentist or dental clinic in the past year, including 47% of African American females and 26% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Disparities in Oral Health

Oral health disparities are profound in the Unites States. Despite major improvements in oral health for the population as a whole, oral health disparities exist for racial and ethnic groups, socioeconomic status, gender, age, and geographic location. Behavioral factors that contribute to these differences include tobacco use, alcohol use, and poor dietary choices. The economic factors that often relate to poor oral health include access to health services and an individual's ability to get and keep dental insurance.

- **Overall:** Non-Hispanic Blacks, Hispanics, and American Indians and Alaska Natives generally have the poorest oral health of any racial and ethnic group in the U.S.
- **Adults and untreated tooth decay:** Blacks, non-Hispanics, and Mexican Americans aged 35-44 years experience untreated tooth decay nearly twice as much as non-Hispanic whites
- **Adults and oral cancer:** The 5-year survival rate is lower for oral cancers among Black men than whites (35% versus 61%)
- **Tooth decay and education:** Adults aged 35-44 years with less than a high school education experience untreated tooth decay nearly three times as much as adults with at least some college education.

(Source: Centers for Disease Control and Prevention, Disparities in Oral Health, May 1, 2020)

Health Behaviors: African American Health Status Perceptions

Key Findings

In 2020, 36% of Lucas County African American adults rated their health status as excellent or very good. Conversely, 25% of Lucas County African American adults described their health as fair or poor, increasing to 33% of those with incomes less than $25,000.

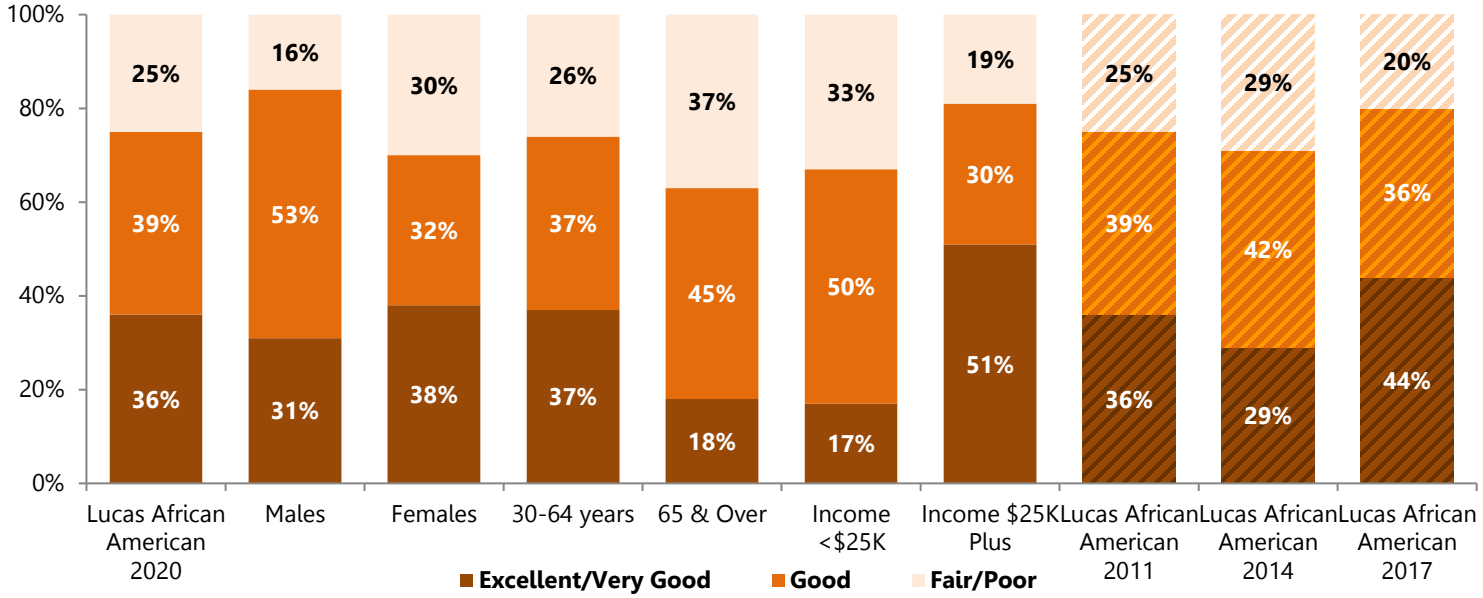
25% of Lucas County African American adults rated their general health as fair or poor.

General Health Status

- Thirty-six percent (36%) of Lucas County African American adults rated their health as excellent or very good. Lucas County African American adults with higher incomes (52%) were most likely to rate their health as excellent or very good, compared to 17% of those with incomes less than $25,000.
- One quarter (25%) of Lucas County African American adults rated their health as fair or poor.
- Lucas County African American adults were most likely to rate their health as fair or poor if they:
  - Had been diagnosed with diabetes (38%)
  - Were 65 years of age or older (37%)
  - Had an annual household income under $25,000 (33%)
  - Were female (30%)
  - Had high blood pressure (29%)

The following graph shows the percentage of Lucas County African American adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 36% of Lucas County African American adults, 38% of females, and 18% of those ages 65 and older rated their health as excellent or very good.

Lucas County African American Adult Health Perceptions*



Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Physical Health Status

- More than one-quarter (30%) of Lucas County African American adults rated their physical health as not good on four or more days in the previous month.
- Lucas County African American adults reported their physical health as not good on an average of 4.9 days in the previous month.
- Lucas County African American adults were most likely to rate their physical health as not good (on four or more days during the past month) if they:
  - Had an annual household income under $25,000 (76%)
  - Were 65 years of age or older (62%)
  - Were male (57%)

Mental Health Status

- Forty-three (43%) of Lucas County African American adults rated their mental health as not good on four or more days in the previous month.
- Lucas County African American adults reported their mental health as not good on an average of 6.1 days in the previous month.
- Thirty-four percent (34%) of Lucas County African American adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Lucas County African American adults were most likely to rate their mental health as not good (on four or more days during the past month) if they:
  - Had an annual household income under $25,000 (67%)
  - Were male (50%)
  - Were 65 years of age or older (49%)

The table shows the percentage of African American adults with poor physical and mental health in the past 30 days.

African American Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past Month*					
Males	43%	10%	12%	6%	20%
Females	47%	12%	7%	4%	16%
Total	45%	12%	9%	5%	17%
Mental Health Not Good in Past Month*					
Males	50%	4%	4%	0%	33%
Females	40%	13%	8%	3%	22%
Total	44%	9%	6%	2%	26%

**Totals may not equal 100% as some respondents answered, "Don't know."*

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Rated health as excellent or very good	37%	36%	29%	44%	36%	43%	44%
Rated general health as fair or poor	25%	26%	29%	20%	25%	23%	21%
Rated mental health as not good on four or more days (in the past month)	30%	29%	32%	33%	43%	29%	26%
Average number of days that mental health was not good (in the past month)	N/A	N/A	N/A	6.0	6.1	N/A	N/A
Rated physical health as not good on four or more days (in the past month)	31%	34%	22%	26%	30%	24%	23%
Average number of days that physical health not good (in the past month)	N/A	N/A	N/A	6.5	4.9	N/A	N/A
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	N/A	N/A	N/A	38%	34%	24%	25%

N/A – Not Available
**County Health Rankings*

Health Behaviors: African American Adult Weight Status

Key Findings

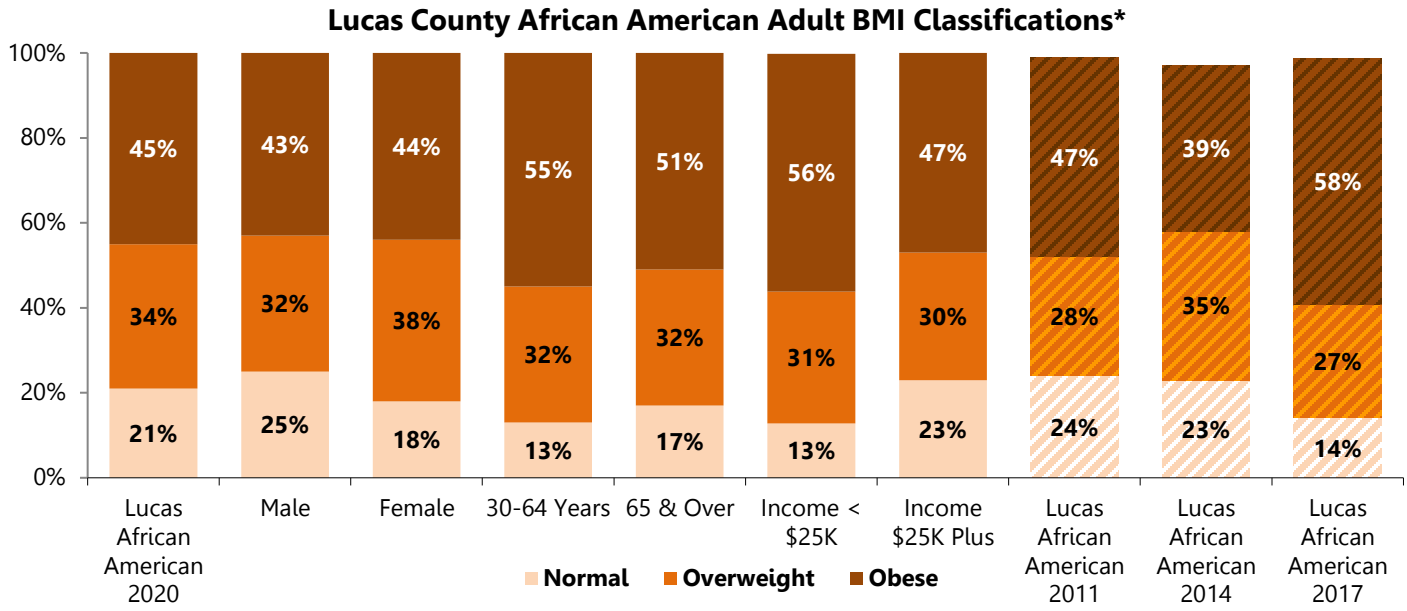
Nearly four-fifths (79%) of Lucas County African American adults were overweight or obese based on body mass index (BMI). Twenty-nine percent (29%) of African American adults did not participate in any physical activity in the past week, including 2% who were unable to exercise.

45% of Lucas County African American adults were obese.

Adult Weight Status

- Nearly four-fifths (79%) of Lucas County African American adults were either overweight (34%) or obese (45%) by body mass index (BMI), putting them at elevated risk for developing a variety of diseases.
- More than two-fifths (46%) of Lucas County African American adults were trying to lose weight, 24% were trying to maintain their current weight or keep from gaining weight, and 2% were trying to gain weight.
- Lucas County African American adults did the following to lose weight or keep from gaining weight in the past month: exercised (34%); drank more water (34%); ate less food, fewer calories, or foods low in fat (33%); ate a low-carb diet (12%); used a weight loss program (3%); used health coaching (3%); took diet pills, powders or liquids without a doctor's advice (2%); participated in a prescribed dietary or fitness program (2%); went without eating 24 or more hours (2%); took prescribed medications (2%); took laxatives (2%); smoked cigarettes (1%); had bariatric surgery (1%); vomited after eating (1%) and other (4%).
- Lucas County African American adults spent an average of 4.0 hours watching TV, 2.4 hours on their cell phone, 1.4 hours on their PC/tablet, and 0.5 hours playing video games on an average day of the week.

The following graph shows the percentage of Lucas County African American adults who are overweight or obese by body mass index (BMI). Examples of how to interpret the information include: 21% of all Lucas County African American adults were classified as normal weight, 34% were overweight, and 45% were obese.



Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Overweight (BMI of 25.0 – 29.9)	37%	28%	35%	27%	34%	34%	33%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	44%	47%	39%	58%	45%	36%	40%

Physical Activity

- In Lucas County, 50% of African American adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. Twenty-five percent (25%) of adults exercised 5 or more days per week. More than one-quarter (29%) of adults did not participate in any physical activity in the past week, including 2% who were unable to exercise.

- Lucas County African American adults spent the most time doing the following physical activities in the past year: walking (31%), strength training (9%), exercise machines (5%), group exercise classes (5%), occupational exercise (4%), running/jogging (2%), exercise videos (1%) and other (5%). Twenty percent (20%) of adults engaged in multiple types of exercise.

- Lucas County African American adults reported the following would help them use community parks, bike trails, and walking paths more frequently:
  - More accessible parks, bike trails, and walking paths (38%)
  - Designated safe routes (31%)
  - Improvements to existing parks, trails, and paths (27%)
  - More public events and programs involving parks, trails, and paths (20%)
  - Better promotion and advertising of existing parks, trails, and paths (18%)

- Lucas County African American adults reported the following reasons for not exercising: time (38%); laziness (32%); self-motivation/will power (28%); pain or discomfort (23%); too tired (23%); weather (18%); choose not to exercise (18%); do not like to exercise (17%); afraid of injury (13%); could not afford a gym membership (13%); no exercise partner (11%); ill or physically unable (8%); no walking, biking trails, or parks (6%); lack of opportunities for those with physical impairments or challenges (4%); too expensive (3%); neighborhood safety (3%); did not know what activity to do (3%); no gym available (1%); poorly maintained/no sidewalks (1%); no child care (1%); no transportation to a gym of other exercise opportunity (1%); other (14%); and doctor advised them not to exercise (1%).

Nutrition

The table below indicates the number of servings of fruit, vegetables, sugar-sweetened beverages, and caffeinated beverages Lucas County African American adults consumed daily.

	5 or more servings daily	3-4 servings daily	1-2 Servings daily	0 servings daily
Fruit	1%	17%	73%	9%
Vegetables	9%	16%	71%	4%
Sugar-sweetened beverages	9%	20%	38%	33%
Caffeinated beverages	9%	14%	40%	37%

- In 2020, 30% of Lucas County African American adults ate 1 to 2 servings of fruits and/or vegetables per day, 40% ate 3 to 4 servings per day, and 27% ate 5 or more servings per day. Three percent (3%) of adults ate no servings of fruits and vegetables per day.

- Lucas County African American adults reported they obtain their fresh fruits and vegetables from the following:
  - Large grocery store (such as Wal-Mart, Meijer, Kroger) (92%)
  - Farmers market (43%)
  - Local grocery store (such as Save-A-Lot) (34%)
  - Grow their own/garden (12%)
  - Food pantry (8%)
  - Dollar general/store (6%)
  - Corner/convenience stores (3%)
  - Community garden (2%)
  - Veggie mobile/mobile produce (2%)
  - Other (6%)

- Lucas County African American adults reported the following barriers to consuming fruits and vegetables: too expensive (10%), did not have access to fruits and vegetables (3%), did not like the taste (2%), did not know how to prepare (1%), no variety (1%), stores did not take EBT (1%), and other barriers (7%).

- Lucas County African American adults reported the following reasons they chose the types of food they ate:
  - Taste/enjoyment (53%)
  - Cost (49%)
  - Healthiness of food (44%)
  - Ease of preparation/time (31%)
  - Nutritional content (24%)
  - Availability (19%)
  - Calorie content (18%)
  - What their family prefers (16%)
  - If it is lactose free (12%)
  - If it is organic (9%)
  - Artificial sweetener content (6%)
  - Health care provider's advice (6%)
  - Availability at food panty (6%)
  - Limitations due to dental issues (5%)
  - If it is gluten free (4%)
  - Other food sensitivities (4%)
  - Limitations set by WIC (4%)
  - If it is genetically modified (3%)
  - Other reasons (10%)

Health Behaviors: African American Adult Tobacco Use

Key Findings

In 2020, 21% of Lucas County African American adults were current smokers, and 18% were considered former smokers. Three percent (3%) of African American adults used e-cigarettes or vapes in the past year.

21% of Lucas County African American adults were current smokers.

Adult Tobacco Use Behaviors

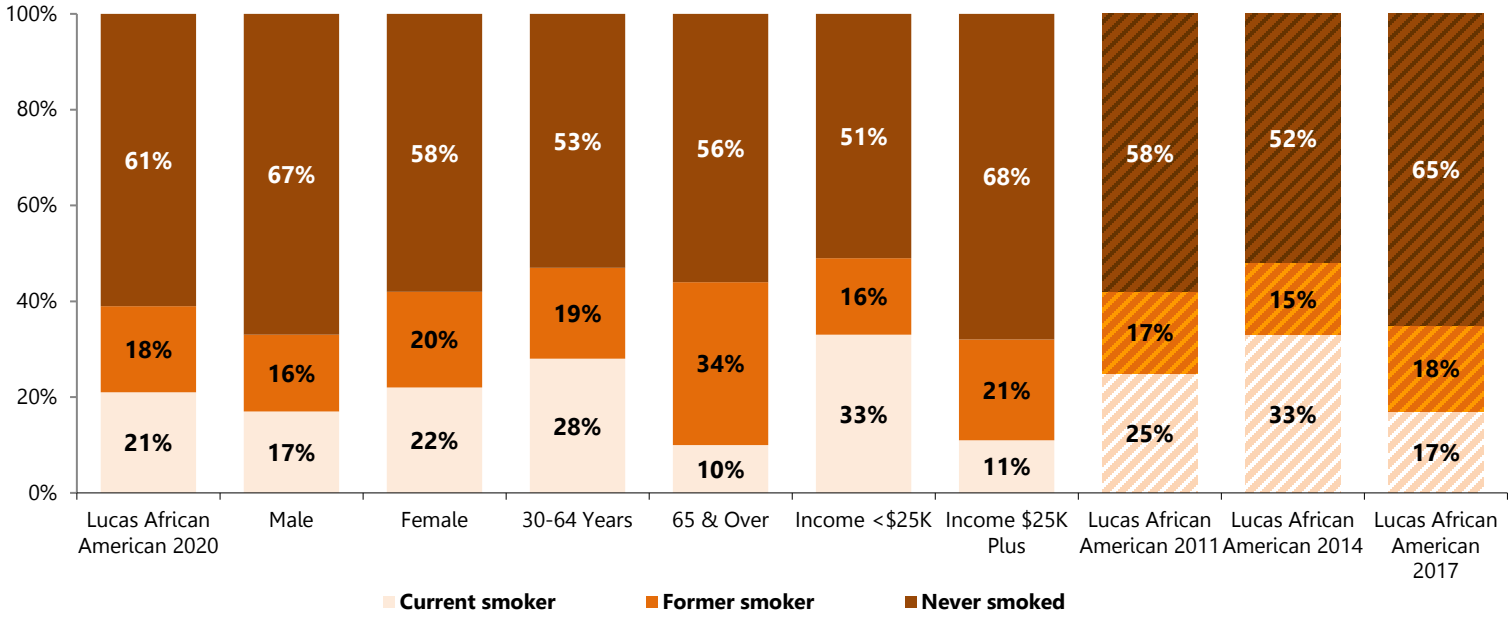
- Twenty-one percent (21%) of Lucas County African American adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Nearly one-fifth (18%) of Lucas County African American adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Lucas County African American adult smokers were more likely to have:
  - Incomes less than $25,000 (33%)
  - Been ages 30-64 (28%)
  - Been female (22%)
- Lucas County African American adults used the following tobacco products in the past year: cigarettes (22%); cigars (6%); little cigars (6%); cigarillos (4%); e-cigarette/vapes (3%); and chewing tobacco, snuff, or snus (3%).
- Sixty-three percent (63%) of Lucas County African American current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Lucas County African American adults had the following rules/practices about smoking tobacco in their home: allowed anywhere in their home (21%), allowed only in certain rooms (8%), and not allowed with children around (21%). Lucas County adults had the following rules/practices about smoking tobacco in their car: allowed inside their car (10%), not allowed inside the car (69%), allowed only when one or more windows are open (11%), and not allowed with children around (15%).
- Lucas County African American adults had the following rules/practices about using e-cigarettes/vapes in their home: allowed only in certain rooms (8%), not allowed with children around (23%), and allowed anywhere (17%). Lucas County adults had the following rules/practices about using e-cigarettes/vapes in their car: allowed inside their car (7%), never allowed (64%), allowed only when one or more windows are open (6%), and not allowed with children around (9%).
- Lucas County African American adults reported they would support an ordinance to ban smoking in the following places:
  - Vehicle with a minor present (71%)
  - Multi-unit housing (50%)
  - Parks or ball fields (48%)
  - College/university campuses (46%)
  - Fairgrounds (39%)
  - Rental homes (37%)
- Twenty-six percent (26%) of Lucas County African American adults reported they would not support an ordinance to ban smoking anywhere.

- Lucas County African American adults indicated e-cigarette or other electronic product vapor is harmful to the following: themselves (65%), an unborn child (53%), others (51%), children (49%), and not harmful to anyone (1%).

- More than one-third (36%) of adults did not know if e-cigarettes or other electronic product vapor was harmful to anyone.

The following graph shows Lucas County African American adults' smoking behaviors. Examples of how to interpret the information include: 21% of all Lucas County African American adults were current smokers, 18% of all adults were former smokers, and 61% had never smoked.

Lucas County African American Adult Smoking Behaviors*



Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Current smoker (smoked on some or all days)	26%	25%	33%	17%	21%	24%	17%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	20%	17%	15%	18%	18%	18%	15%
Tried to quit smoking	N/A	N/A	N/A	67%	63%	63%	69%
Used chewing tobacco or snuff in the past year	N/A	N/A	N/A	1%	3%	N/A	N/A

N/A – Not Available

Health Behaviors: Adult Alcohol Consumption

Key Findings

Nearly half (46%) of Lucas County African American adults had at least one alcoholic drink in the past month. One-fifth (20%) of African American adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.

46% of Lucas County African American adults were considered current drinkers.

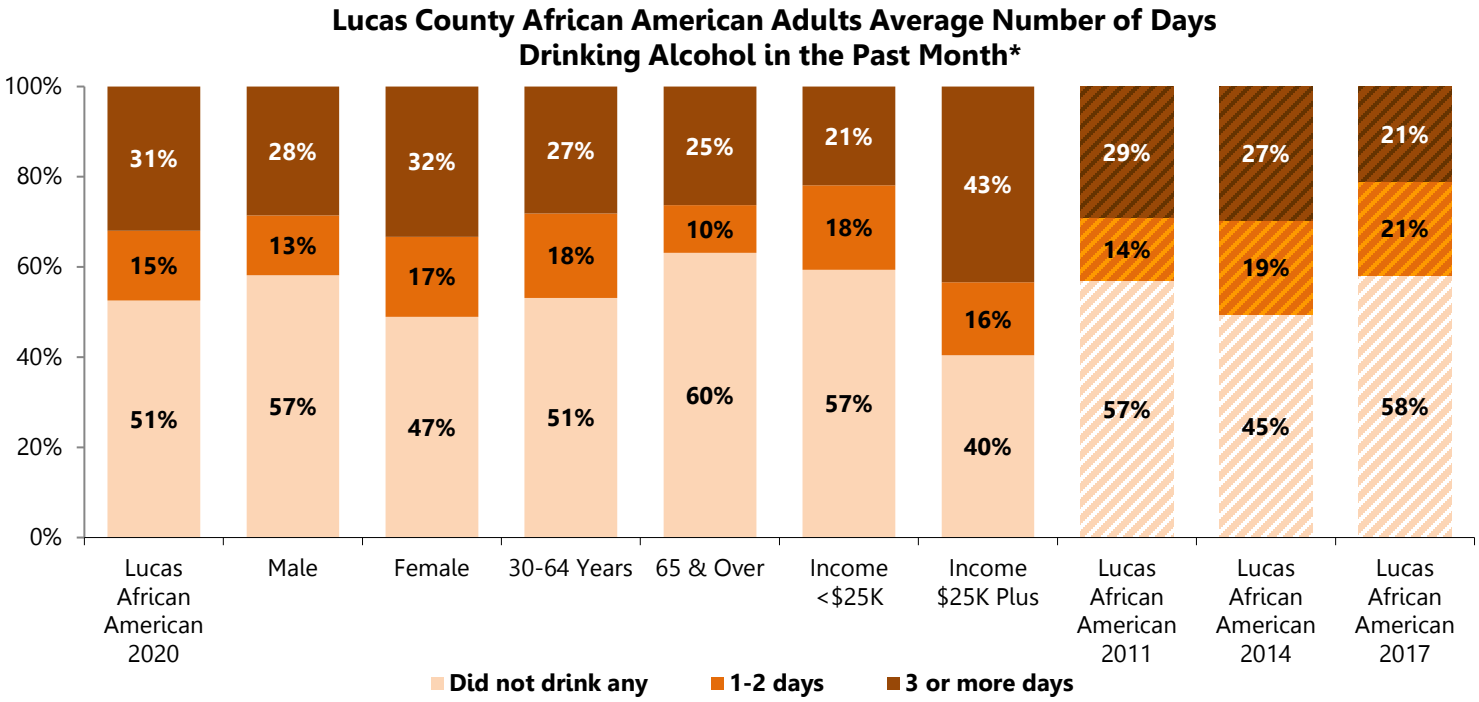
Adult Alcohol Consumption

- Nearly half (46%) of Lucas County African American adults had at least one alcoholic drink in the past month, increasing to 41% of males and 59% of those with incomes less than $25,000.
- Of those who drank, Lucas County African American adults drank 4.1 drinks on average.
- One-fifth (20%) of Lucas County African American adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers. Of those who drank in the past month, 47% had at least one episode of binge drinking.
- Five percent (5%) of Lucas County African American adults reported driving after having perhaps too much alcohol to drink in the past month, increasing to 9% of those ages 30-64.
- Lucas County African American adults reported they or a family member experienced the following during the past six months:
  - Had to drink more to get same effect (6%)
  - Drank more than they expected (5%)
  - Spent a lot of time drinking (5%)
  - Continued to drink despite problems caused by drinking (5%)
  - Used prescription drugs while drinking (4%)
  - Gave up other activities to drink (3%)
  - Drank to ease withdrawal symptoms (3%)
  - Placed themselves or their family in harm (3%)
  - Tried to quit or cut down, but couldn't (2%)
  - Drove vehicle or other equipment after having any alcoholic beverage (2%)
  - Had legal problems (1%)
- Reasons African American adults did not use a program or service to help with an alcohol problem for themselves or a loved one included the following reasons: had not thought of it (7%), transportation (4%), programs were full (3%), fear (3%), did not have any openings (wait-listed) (3%), do not want to miss work (3%), stigma of seeking alcohol services (1%), and other (17%). Seventy-six percent (76%) of adults indicated that they did not need a program or service to help with an alcohol problem for themselves or a loved one.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Current drinker (had at least one drink of alcohol within the past month)	40%	43%	46%	42%	46%	49%	47%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	N/A	21%	21%	32%	20%	18%	13%
Drove after having perhaps too much alcohol to drink (in the past month)	N/A	N/A	N/A	7%	5%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Lucas County African American adults consuming alcohol in the past month. Examples of how to interpret the information include: 51% of all Lucas County African American adults did not drink alcohol in the past month, including 57% of males and 47% of females.



**Percentages may not equal 100% as some respondents answered, "Don't know."*

Note for graph: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: African American Adult Drug Use

Key Findings

In 2020, 11% of Lucas County African American adults had used recreational marijuana during the past 6 months. Nine percent (9%) of African American adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past six months.

Adult Drug Use

- Lucas County African American adults reported that they **and/or** an immediate family member/someone in their household used the following in the past 6 months:
  - Recreational marijuana or hashish (17%)
  - Wax, oil with THC edibles (14%)
  - Medical marijuana (7%)
  - Amphetamines, methamphetamine or speed (7%)
  - LSD, mescaline, peyote, psilocybin, DMY, or mushrooms (3%)
  - Cocaine, crack, or coca leaves (2%)
  - Inappropriate use of over-the-counter medications (2%)
  - Heroin/fentanyl (2%)
  - Ecstasy, E, or GHB (2%)
  - Inhalants (2%)
  - Synthetic marijuana/k2 (2%)
  - Bath salts (2%)

- Eleven percent (11%) of Lucas County African American adults reported using recreational marijuana or hashish in the past 6 months.

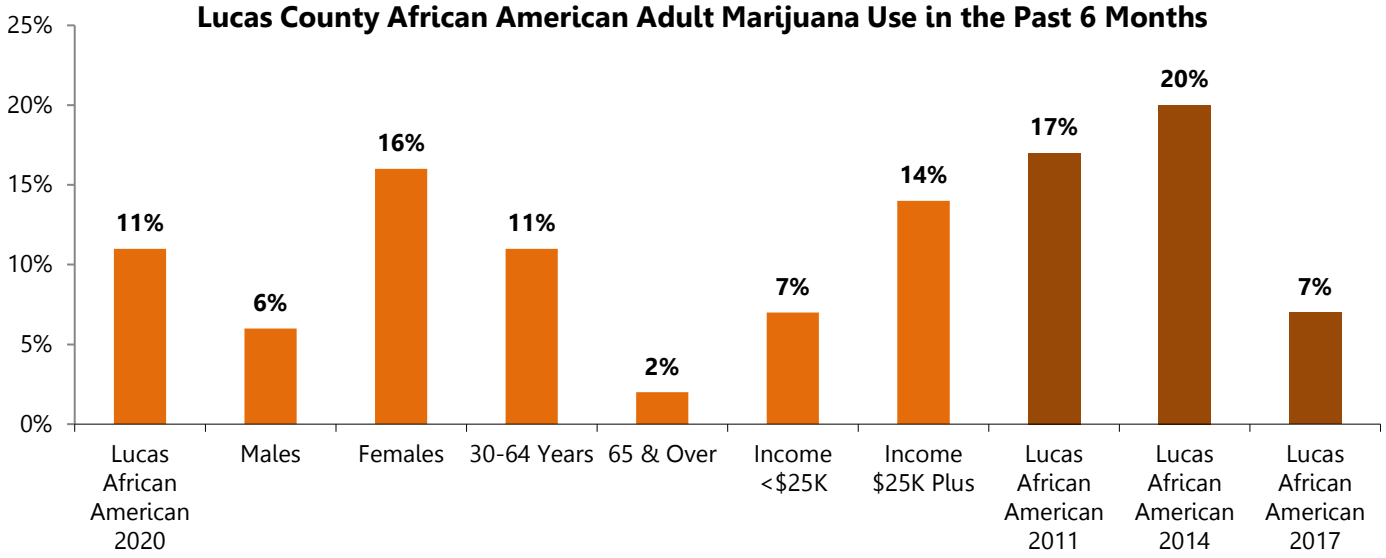
- Lucas County African American adults reported that they **and/or** an immediate family member/someone in their household took the following medications not prescribed to them to feel good, high and/or more active or alert during the past six months:
  - Tranquilizers such as Valium or Xanax (6%)
  - Codeine, Demerol, Morphine, Percocet, Dilaudid, or Fentanyl (5%)
  - Suboxone or Methadone (5%)
  - Ritalin, Adderall, Concerta, or other ADHD medication (4%)
  - Neurontin (4%)
  - Steroids (4%)
  - OxyContin (3%)
  - Vicodin (2%)
  - Tramadol/Ultram (2%)

- As a result of using drugs, Lucas County African American adults indicated they or someone in their household experienced the following: failed a drug screen (5%), placed themselves in dangerous situations (3%), regularly failed to fulfill obligations at work or home (2%), and had legal problems (1%).

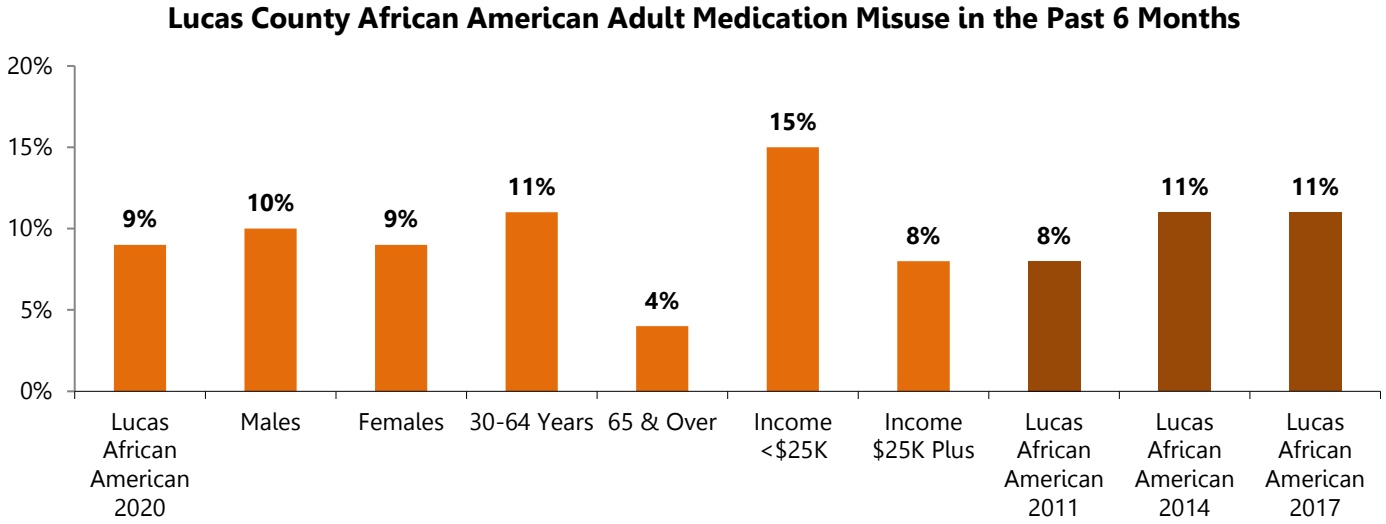
- Seven percent (7%) of Lucas County African American adults who had been prescribed opioid-based medications had trouble stopping.

- African American adults did not using a program or service to help with a drug problem for themselves or a loves one for the following reasons: had not thought of it (4%), did not have any openings (wait-listed) (3%), did not want to miss work (3%), and other (6%). Ninety-two percent (92%) of adults indicated that they did not need a program or service to help with a drug problem for themselves or a loved one.

The following graphs indicate adult recreational marijuana use and prescription drug use in the past six months. An example of how to interpret the information on the first graph includes: 11% of Lucas County African American adults used recreational marijuana in the past six months, including 16% of females and 14% of those with incomes more than $25,000.



**Does not include wax or oil with THC edibles.*

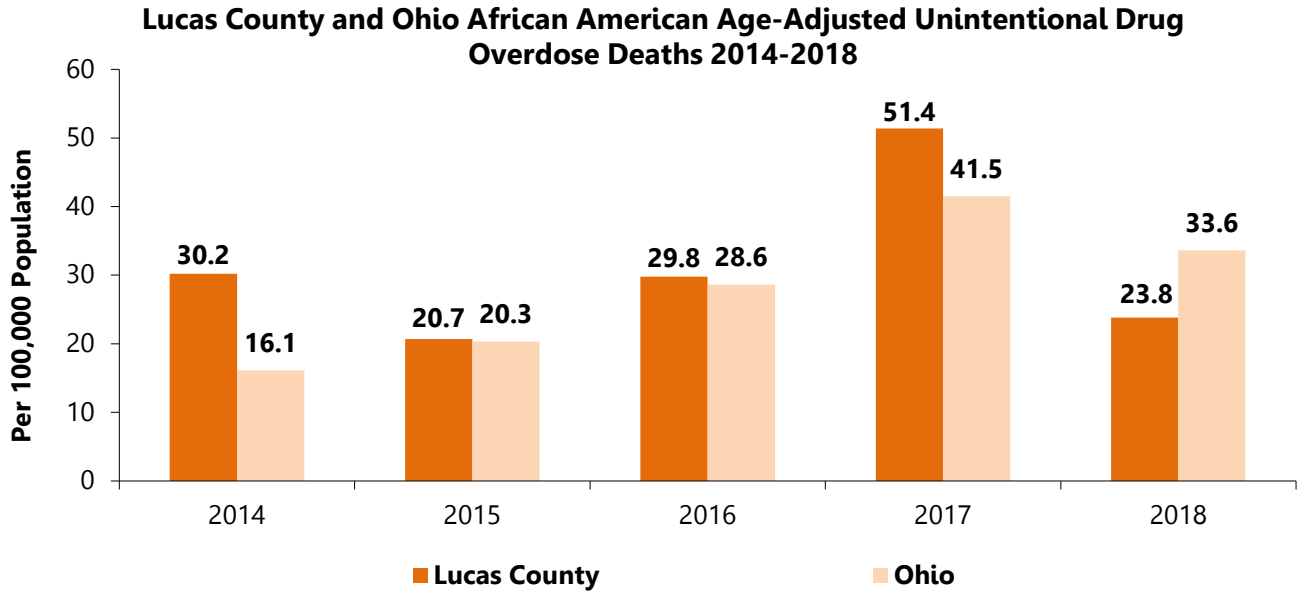


Notes for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

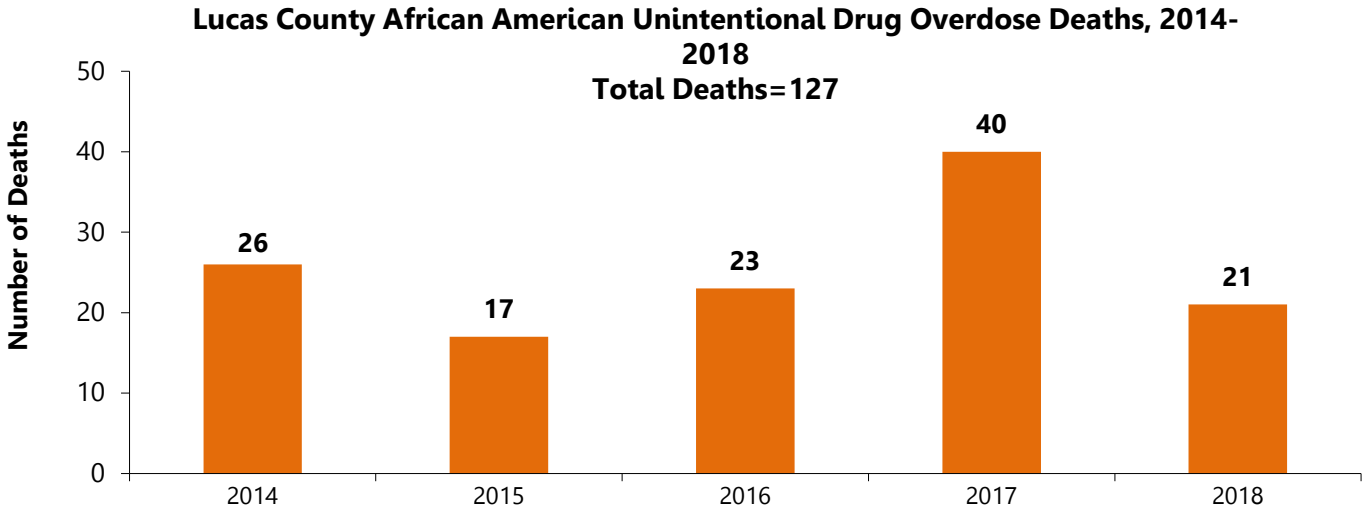
Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Adults who used marijuana in the past six months	9%	17%	20%	7%	11%	N/A	N/A
Adults who misused prescription drugs in the past six months	10%	8%	11%	11%	9%	N/A	N/A
Adults who used heroin in the past six months	<1%	0%	1%	1%	1%	N/A	N/A

N/A – Not Available

The following graph shows the Lucas County and Ohio African American age-adjusted unintentional drug overdose deaths from 2014 to 2018.



The following graph shows the number of African American unintentional drug overdose deaths from 2014 to 2018 in Lucas County.



(Source for graphs: Ohio Public Health Data Warehouse, 2014-2018, Updated 12/11/19)
Note Ohio Resident deaths include individuals that resided in Ohio at the time of death regardless of where the death occurred.

Health Behaviors: African American Adult Sexual Behavior

Key Findings

In 2020, 57% of Lucas County African American adults had sexual intercourse. Six percent (6%) of African American adults had more than one partner.

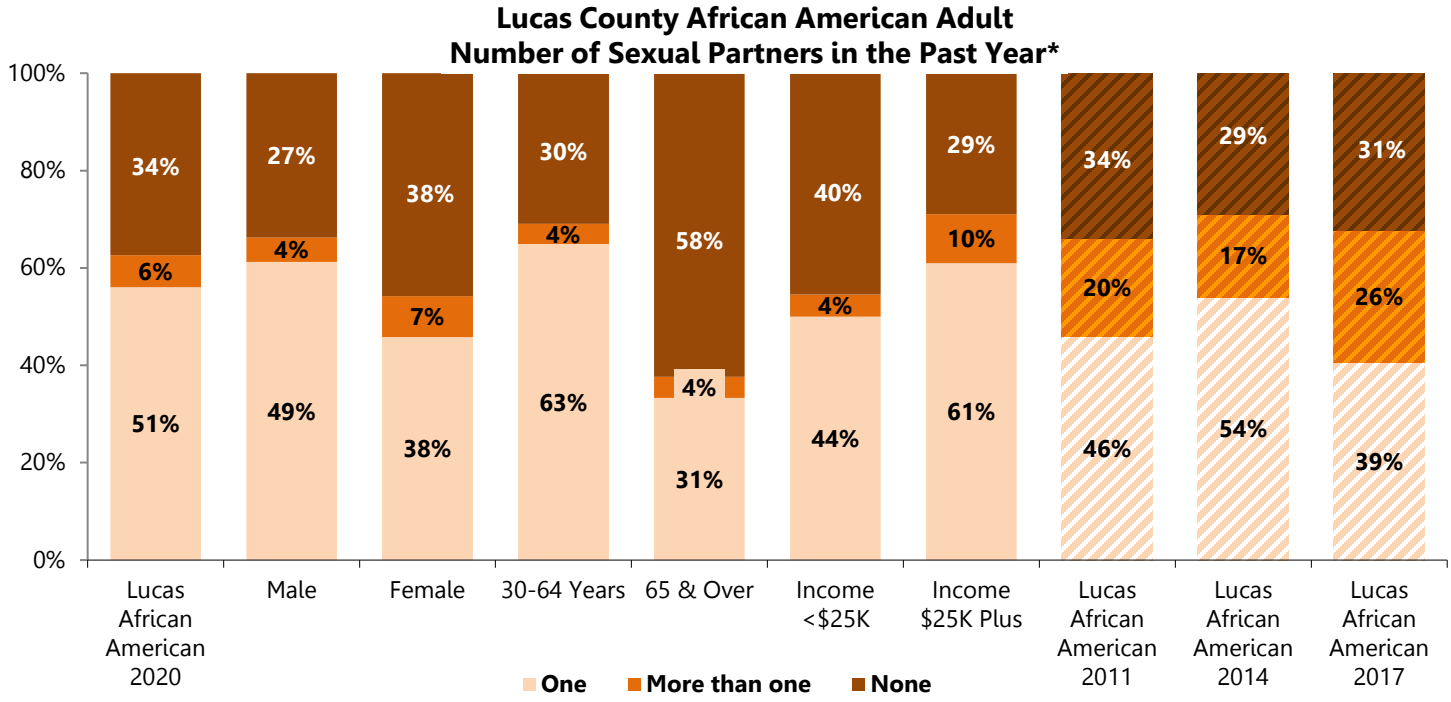
Adult Sexual Behavior

- Fifty-seven percent (57%) of Lucas County African American adults had sexual intercourse in the past year.
- Six percent (6%) of Lucas County African American adults reported they had intercourse with more than one partner in the past year, increasing to 10% of those with incomes of $25,000 or more.
- Lucas County African American adults used the following methods of birth control: they or their partner was too old to get pregnant (22%); male or female condoms (16%); female sterilization (tubes tied) (11%); withdrawal (7%); hysterectomy (6%); practicing abstinence (5%); birth control pills, any kind (4%); they or their partner was infertile (4%); male sterilization (vasectomy) (2%); contraceptive ring (e.g., NuvaRing) (2%); foam, jelly, film or cream (2%); had ovaries or testicles removed (1%); contraceptive implant (e.g., Nexplanon) (1%); shots (e.g., Depo-Provera) (1%); and having sex at certain times (rhythm or natural family planning) (1%).
- Seven percent (7%) of Lucas County African American adults were not using any method of birth control, 3% were pregnant and 2% were trying to get pregnant.
- The following situations applied to Lucas County African American adults: had sex without a condom in the past year (17%); treated for an STD in the past year (4%); had anal sex without a condom in the past year (3%); tested positive for Hepatitis C (3%); injected any drug other than those prescribed in the past year (2%); was forced to have sex (1%); had sex with someone they met on social media (1%); had four or more sexual partners in the past year (1%); and engaged in sexual activity following alcohol or other drug use that they would not have done if sober (1%).
- Nine percent (9%) of Lucas County African American adults were forced or coerced to have any sexual activity when they did not want to, increasing to 16% of those with incomes less than $25,000. Eighteen percent (18%) of those who were forced to have sexual activity reported it.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Had more than one sexual partner in past year	20%	20%	17%	26%	6%	N/A	N/A

N/A – Not Available

The following graph shows the number of sexual partners Lucas County African American adults had in the past year. An example of how to interpret the information includes: 51% of all African American Lucas County adults had one sexual partner in the past year, 6% had more than one partner, and 34% did not have a sexual partner.

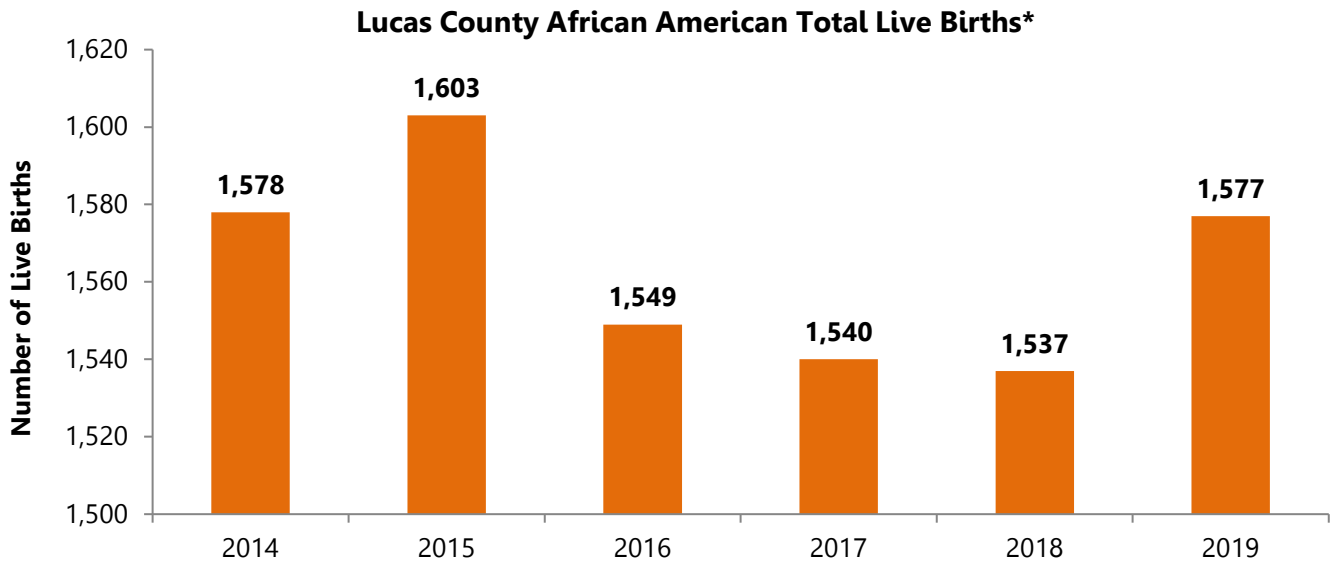


Respondents were asked: "During the past year, with how many different people have you had sexual intercourse?"
**Percentages may not equal 100% as some respondents answered, "Don't know".*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

African American Pregnancy Outcomes

Note: Pregnancy outcome data includes all births to both adults and adolescents.

- From 2014 to 2019, there was an average of 1,564 live births per year in Lucas County.



**Note: Mothers Race = African American*
(Source: Ohio Public Health Data Warehouse 2014-2018, Updated 8/16/2020)

Health Behaviors: Adult Mental Health

Key Findings

Nine percent (9%) of Lucas County African American adults seriously considered attempting suicide in the past year. Twenty-three percent (23%) of African American adults had a period of two or more weeks when they felt sad or hopeless nearly every day that they stopped doing usual activities in the past year.

9% of Lucas County African American adults seriously considered attempting suicide in the past year.

Adult Mental Health

- During the past year, Lucas County African American adults experienced the following almost every day for two weeks or more in a row: did not get enough sleep or rest (39%); felt worried, tense or anxious (25%); felt sad, blue or depressed (23%); had high stress (20%); stopped during some usual activities (18%); had an unusual increase or loss of appetite (12%); and felt very healthy and full of energy (11%).

- Nine percent (9%) of Lucas County African American adults seriously considered attempting suicide in the past year.

- One percent (1%) of Lucas County African American adults reported actually attempting suicide in the past year.

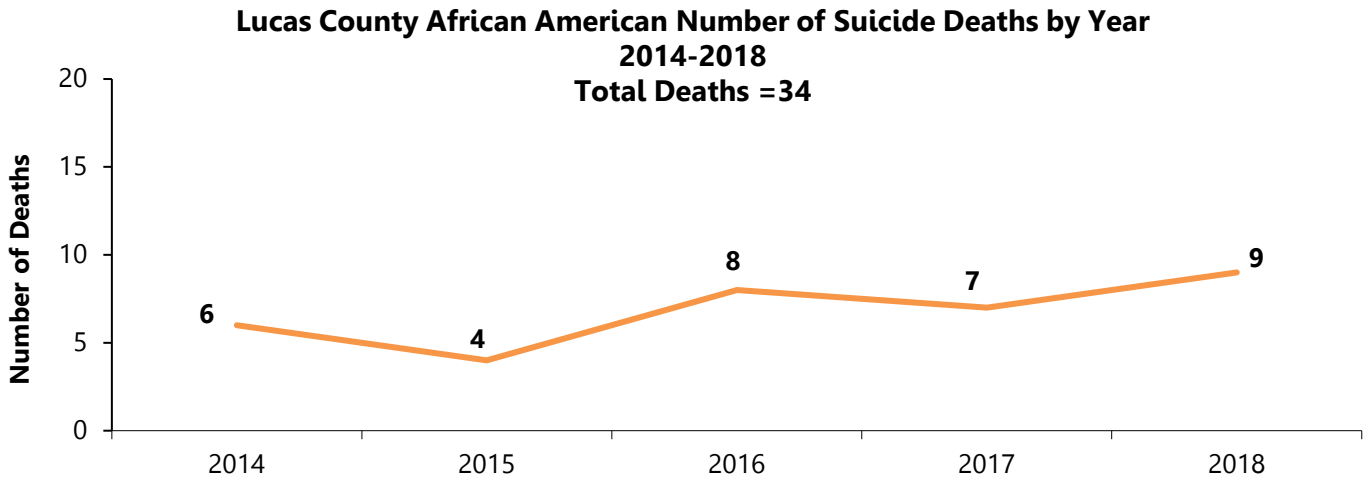
- Lucas County African American adults reported they or someone in their household were diagnosed with or treated for the following mental health issues in the past year:
  - Depression (25%)
  - Anxiety or emotional problems (22%)
  - Anxiety disorder (panic attacks, phobia, obsessive-compulsive disorder) (21%)
  - Alcohol and illicit drug abuse (10%)
  - Bipolar disorder (9%)
  - Attention deficit disorder (ADD/ADHD) (9%)
  - Other trauma (9%)
  - Post-traumatic stress disorder (PTSD) (6%)
  - Eating disorder (6%)
  - Life adjustment disorder (4%)
  - Developmental disability (4%)
  - Autism spectrum (2%)
  - Psychotic disorder (schizophrenia, schizoaffective disorder) (1%)
  - Gambling problem (1%)
  - Other mental health disorder (10%)

- Twenty-one percent (21%) of Lucas County African American adults indicated they or a family member had taken medication for one or more mental health issues.

- Lucas County African American adults dealt with stress in the following ways: prayed/meditated (55%), listened to music (44%), talked to someone they trust (41%), exercised (39%), ate more or less than normal (33%), slept (31%), worked on a hobby (19%), worked (19%), drank alcohol (17%), smoked tobacco (11%), used prescription drugs as prescribed (11%), took it out on others (9%), used illegal drugs (5%), called a professional (4%), misused prescription drugs (3%), and other ways (11%).

- The following prevented Lucas County African American adults or someone in their household from using a program or service to help with depression, anxiety, or other emotional problems: had not thought of it (8%), fear (4%), other priorities (4%), took too long to get in to see a doctor/ health care provider (4%), could not get to the office or clinic (4%), could not find a mental health doctor or provider (4%), stigma of seeking mental health services (3%), co-pay/deductible too high (3%), did not know how to find a program (3%), transportation (1%), could not afford to go (1%), and other reasons (4%). Fifty-eight percent (58%) of adults indicated they did not need such a program.

The graph below shows the number of African American suicide deaths by year in Lucas County.



(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 12/11/19)
Note Ohio Resident deaths include individuals that resided in Ohio at the time of death regardless of where the death occurred.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Considered attempting suicide in the past year	N/A	3%	5%	2%	9%	N/A	N/A

N/A – Not Available

Chronic Disease: African American Cardiovascular Health

Key Findings

Five percent (5%) of Lucas County African American adults had survived a heart attack and 4% had survived a stroke at some time in their life. Fifty-five percent (55%) of adults had high blood pressure, 45% were obese, 31% had high blood cholesterol, and 21% were current smokers, four known risk factors for heart disease and stroke.

Lucas County African American Leading Causes of Death 2016-2018

Total Deaths: 2,543

1. Heart Disease (24% of all deaths)
2. Cancer (21%)
3. Accidents, Unintentional Injuries (7%)
4. Stroke (6%)
5. Diabetes (5%)

(Source: Ohio Public Health Warehouse, 2016-2018)

Ohio African American Leading Causes of Death 2016-2018

Total Deaths: 41,942

1. Heart Disease (22% of all deaths)
2. Cancers (20%)
3. Accidents, Unintentional Injuries (7%)
4. Stroke (5%)
5. Diabetes (4%)

(Source: Ohio Public Health Warehouse, 2016-2018)

Heart Disease and Stroke

- Five percent (5%) of Lucas County African American adults reported they were diagnosed with angina.
- Fifty percent (50%) of those with angina were receiving treatment for the diagnosis.
- Five percent (5%) of Lucas County African American adults reported they had a heart attack.
- Fifty-seven percent (57%) of those who had a heart attack reported currently receiving treatment for the diagnosis.
- Four percent (4%) of Lucas County African American adults reported they had a stroke.
- Sixty percent (60%) of those who had a stroke reported currently receiving treatment for the diagnosis.
- Five percent (5%) of Lucas County African American adults reported they had heart disease, increasing to 10% of those over the age of 65.
- Sixty-seven percent (67%) of Lucas County African American adults with heart disease were receiving treatment for it.

5% of African American adults survived a heart attack or myocardial infarction.

High Blood Pressure (Hypertension)

- More than half (55%) of Lucas County African American adults had been diagnosed with high blood pressure. Ninety-six percent (96%) of Lucas County African American adults reported they were currently receiving treatment for the diagnosis.
- Ninety-one percent (91%) of Lucas County African American adults had their blood pressure checked within the past year.
- Lucas County African American adults diagnosed with high blood pressure were more likely to have:
  - Been classified as overweight or obese by body mass index (BMI) (90%)
  - Been age 65 years or older (73%)
  - Incomes less than $25,000 (73%)

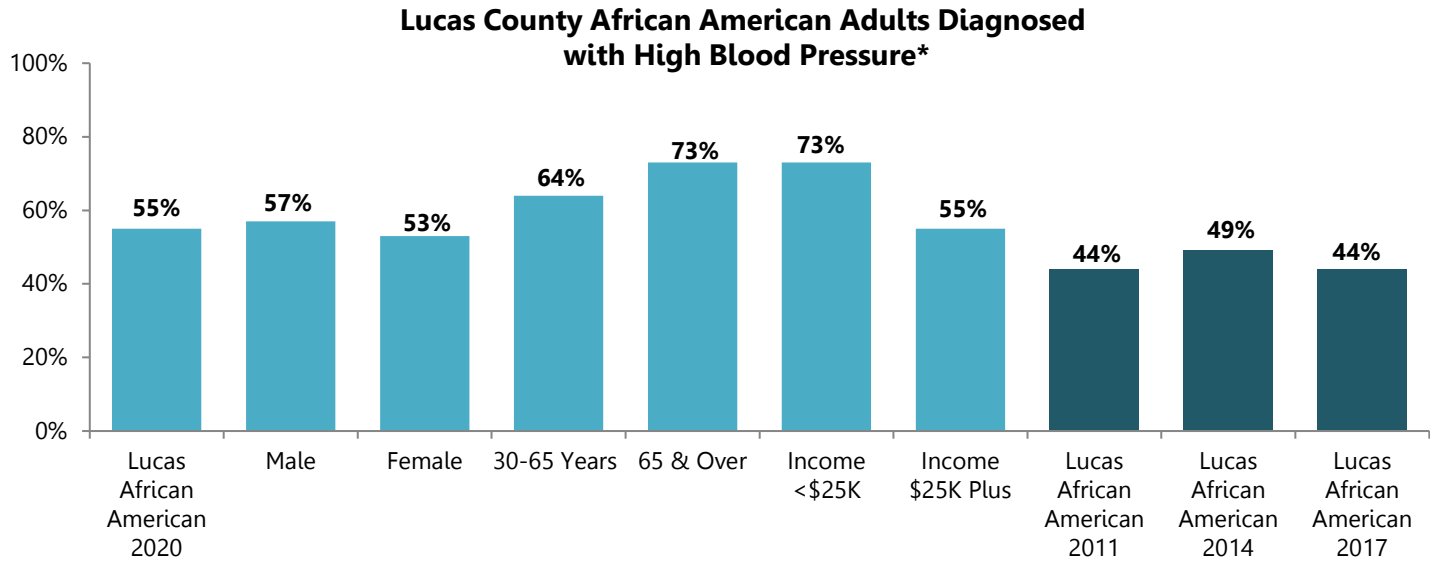
High Blood Cholesterol

- Thirty-one percent (31%) of Luas County African American adults had been diagnosed with high blood cholesterol. Seventy-eight percent (78%) of adults reported they were currently receiving treatment for the diagnosis.

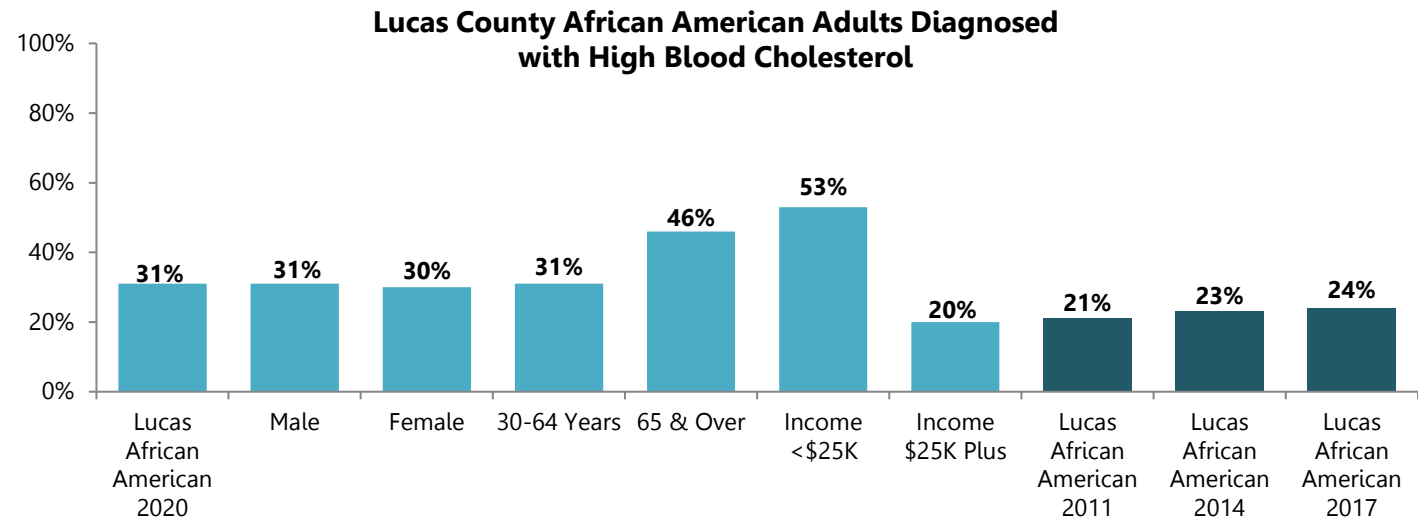
- Eighty-four percent (84%) of Lucas County African American adults had their blood cholesterol checked within the past five years.

- Lucas County African American adults with high blood cholesterol were more likely to:
  - Have been classified as overweight or obese by body mass index (BMI) (100%)
  - Have incomes less than $25,000 (53%)
  - Have been ages 65 years or older (46%)

The following graphs show the number of Lucas County African American adults who have been diagnosed with high blood pressure and high blood cholesterol. An example of how to interpret the information on the first graph includes: 55% of all Lucas County African American adults have been diagnosed with high blood pressure, including 57% of males and 73% of those 65 years and older.

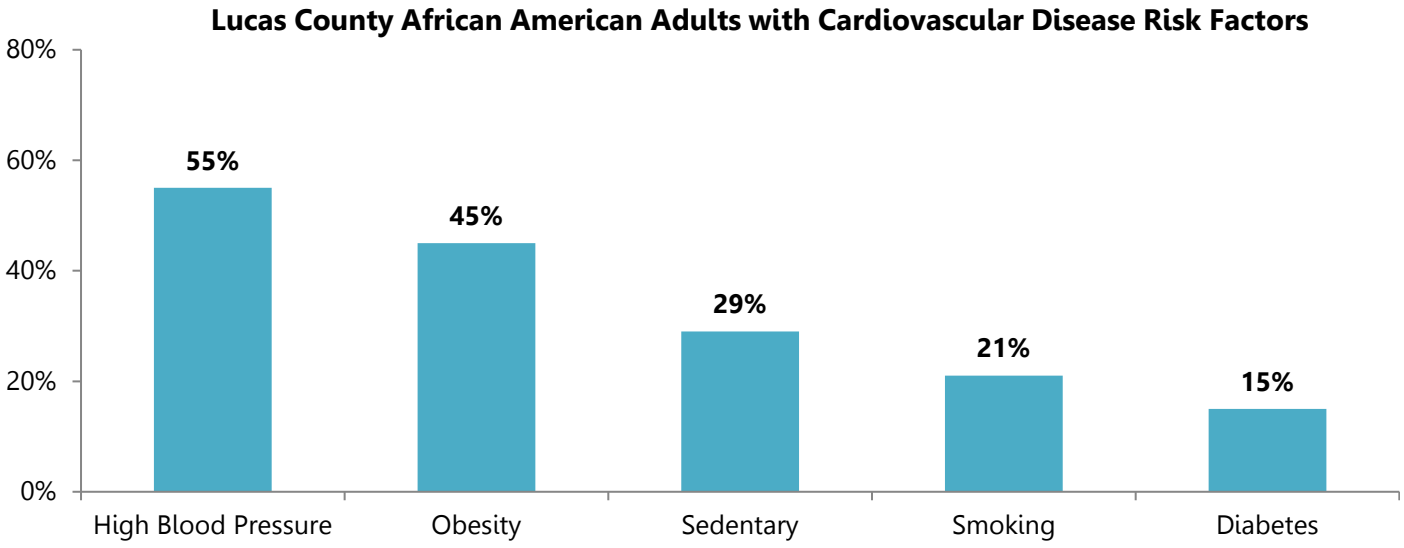


**Does not include respondents who indicated high blood pressure during pregnancy only.*



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph demonstrates the percentage of Lucas County African American adults who had major risk factors for developing cardiovascular disease (CVD).



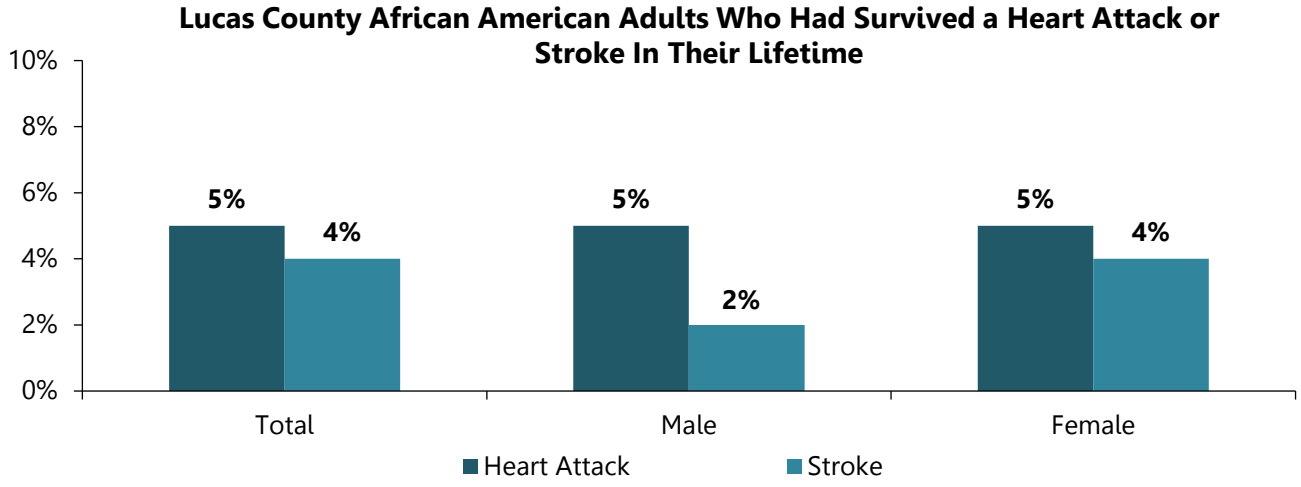
Healthy People 2020 Objectives

Heart Disease and Stroke (HDS)*

Objective	2020 Lucas County African American Survey Population Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	55%	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	84%	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	31%	14%

Note: All U.S. figures age-adjusted to 2000 population standard.
**Healthy People 2020 target is not race specific*
(Source: Healthy People 2020, 2017 BRFSS, 2019/2020 Lucas County Health Assessment)

The following graph shows the percentage of Lucas County African American adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 2% of Lucas County African American males survived a stroke compared to 4% of females.



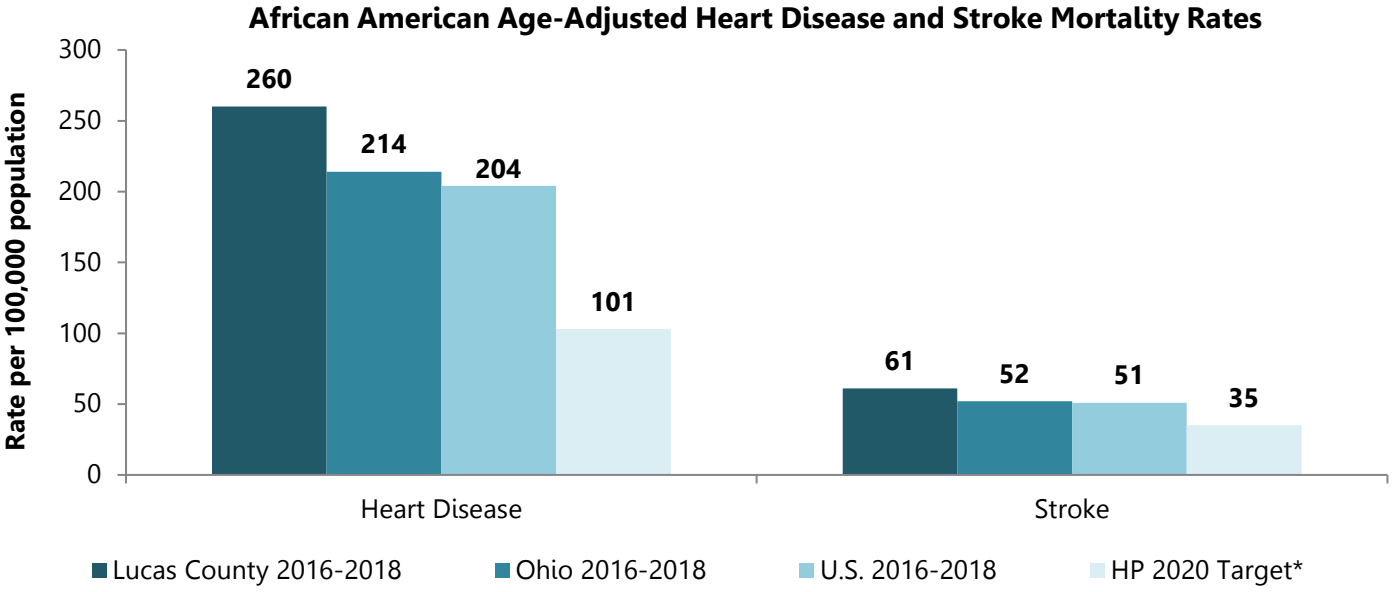
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Had angina	10%	1%	5%	2%	5%	3%	4%
Had a heart attack	N/A	1%	8%	4%	5%	5%	4%
Had a stroke	N/A	2%	4%	6%	4%	6%	5%
Had been diagnosed with high blood pressure	54%	44%	49%	44%	55%	40%*	N/A
Had been diagnosed with high blood cholesterol	37%	21%	23%	24%	31%	28%*	N/A
Had their blood cholesterol checked within the last five years	75%	69%	79%	68%	84%	88%*	N/A

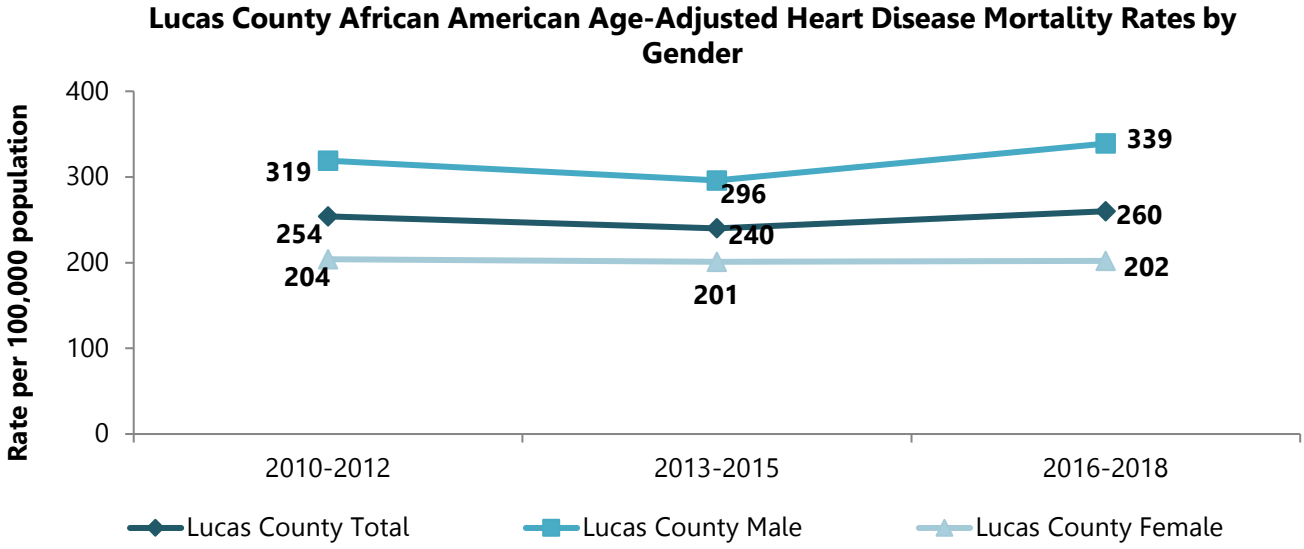
**2017 BRFSS data*
N/A – Not Available

The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- When age differences are accounted for, the statistics indicate that the Lucas County African American heart disease mortality rate was higher than the figures for the state, the U.S., and Healthy People 2020 target from 2016 to 2018.
- The 2016 to 2018 Lucas County African American age-adjusted stroke mortality rate was higher than the figures for the state, the U.S., and the Healthy People 2020 target.
- From 2016 to 2018, the Lucas County African American female and male age-adjusted heart disease mortality rates fluctuated.



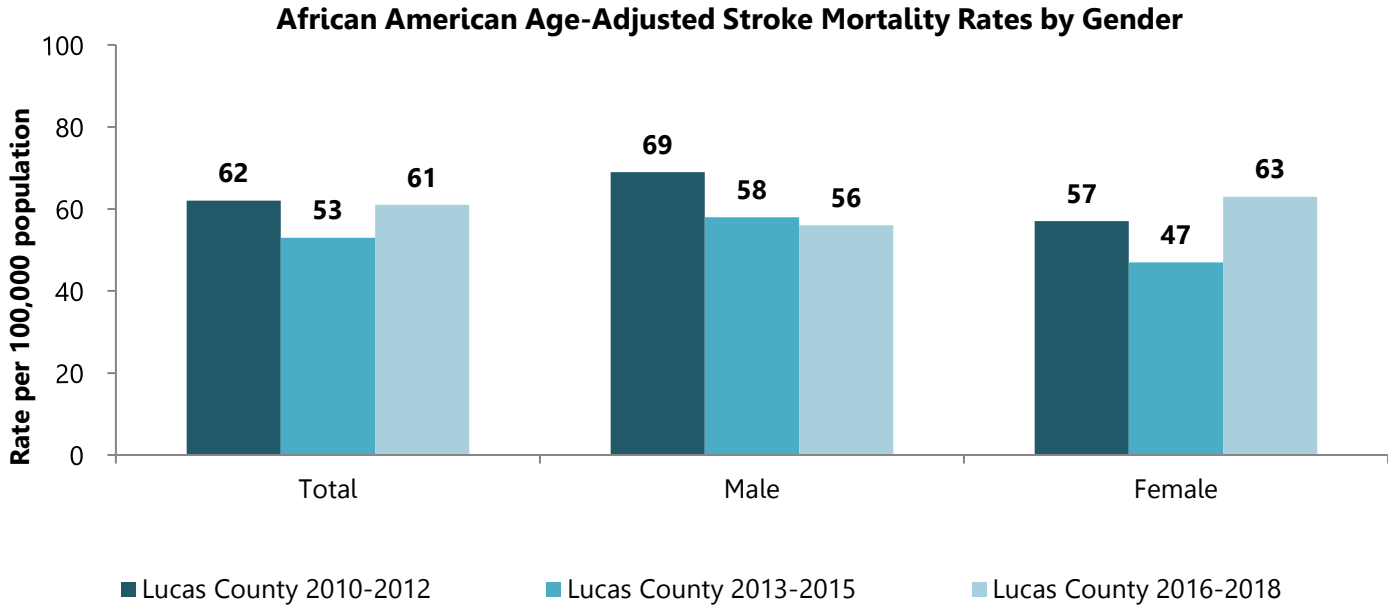
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2016-2018, Healthy People 2020)
**The Healthy People 2020 Target objective for coronary heart disease is reported for heart attack mortality. Healthy People 2020 targets are not race specific*



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for stroke by gender.

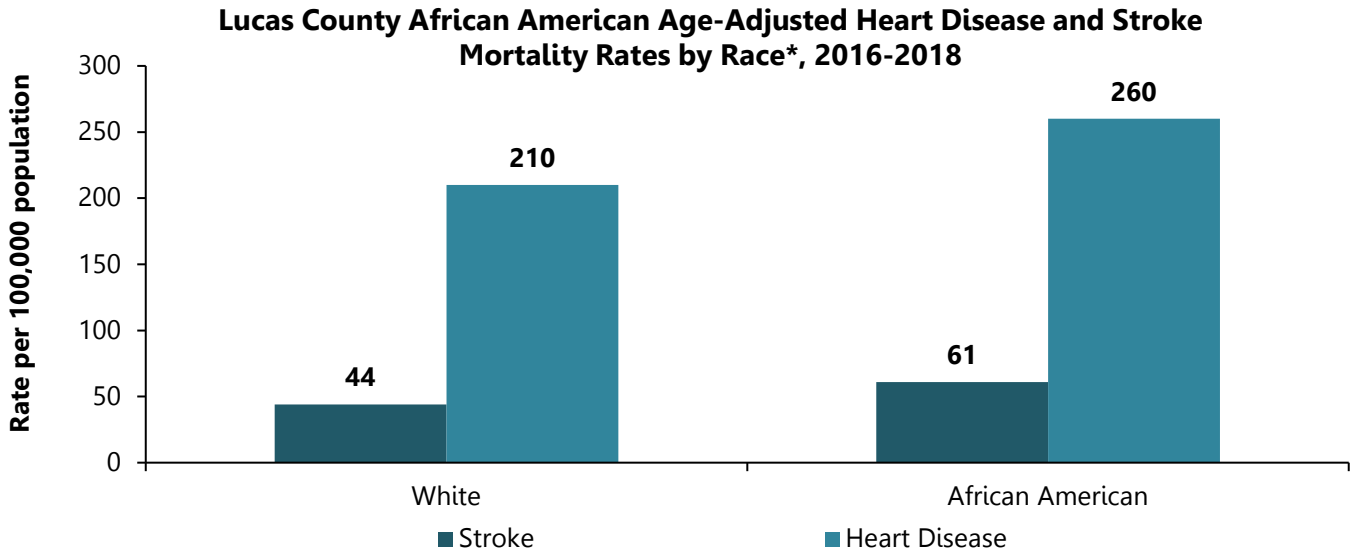
- From 2010 to 2018, the Lucas County African American male stroke mortality decreased.



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by race. The graph shows:

- From 2016 to 2018, the age-adjusted stroke and heart disease mortality rates were higher in the African American population than the white population.



**Races represented are white and Black. All other races were not available due to low rates.*
(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 3/30/20)

Chronic Disease: African American Cancer

Key Findings

In 2020, 11% of Lucas County African American adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (533) of all (2,543) Lucas County African American resident deaths.

Lucas County African American Incidence of Cancer, 2013-2017

All Types: 1,785 cases

- Prostate: 313 cases (18%)
- Breast: 274 cases (15%)
- Lung and Bronchus: 272 cases (15%)
- Colon and Rectum: 178 cases (10%)

From 2016-2018, there were 533 African American cancer deaths in Lucas County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 11/3/2019)

Adult Cancer

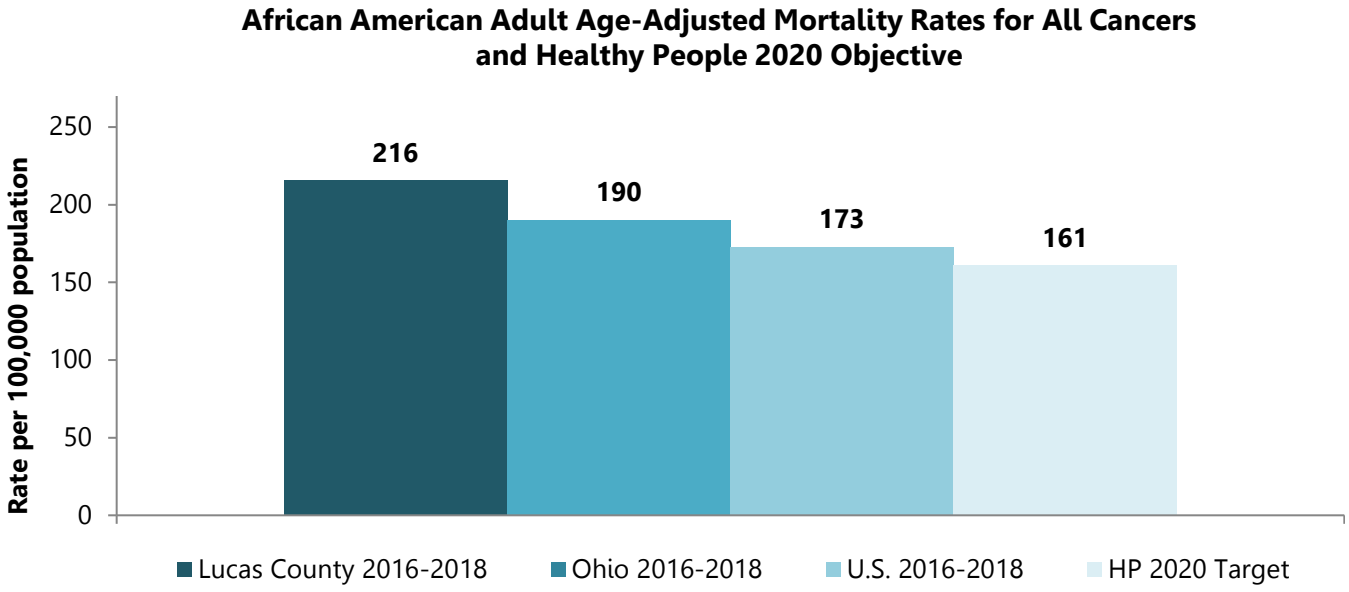
- Eleven percent (11%) of Lucas County African American adults were diagnosed with cancer at some point in their lifetime, increasing to 23% of those over the age of 65.
- Of Lucas County African American adults diagnosed with cancer, they reported the following types: prostate (75%), breast (13%), cervical (13%), lung (8%), renal (8%), colon (8%), and other types of cancer (50%). Eight percent (8%) of adults were diagnosed with multiple types of cancer.
- Lucas County African American adults reported receiving the following cancer screenings:
  - Colorectal cancer in the past five years (22%)
  - Oral cancer in the past year (10%)
  - Lung cancer in the past three years (5%)
  - Skin cancer in the past year (4%)

11% of Lucas County African American adults were diagnosed with cancer at some point in their lifetime.

Cancer Facts

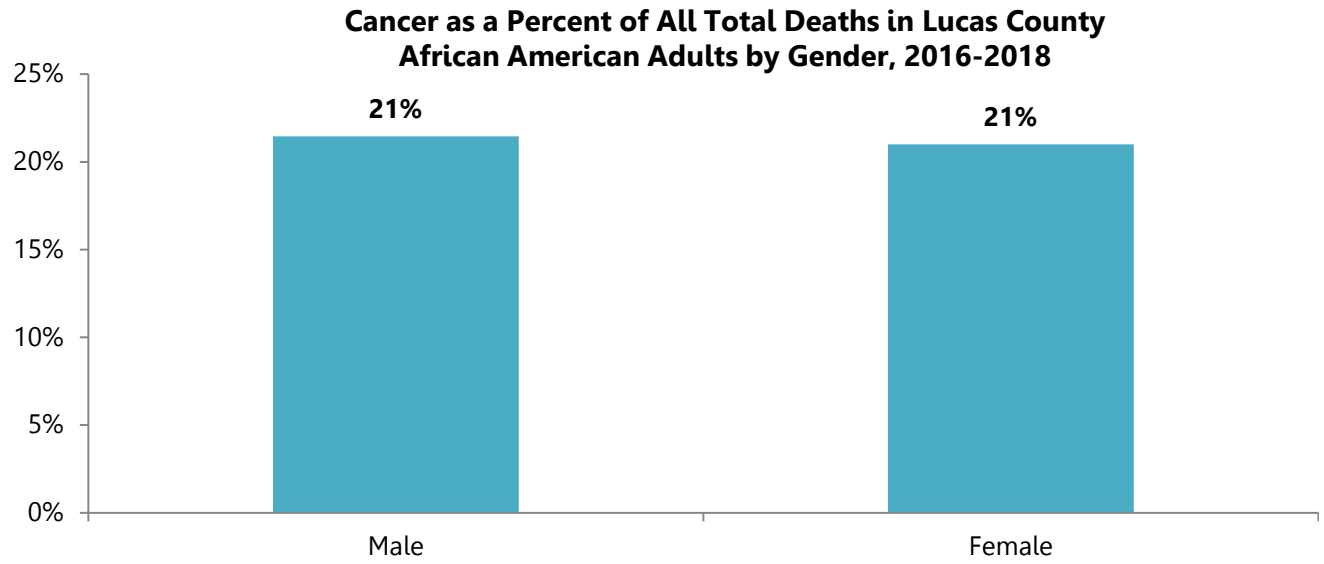
- The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 21% (533) of all (2,543) Lucas County African American resident deaths *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- The American Cancer Society states that about 606,520 Americans are expected to die of cancer in 2020. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease *(Source: American Cancer Society, Facts & Figures 2020).*
- ODH reports that lung and bronchus cancer (total deaths=77) was the leading cause of African American male cancer deaths from 2016 to 2018 in Lucas County. Colorectal cancers caused 27 male deaths, cancer of the prostate caused 31 male deaths during the same time period *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- ODH reports that lung and bronchus cancer was the leading cause of African American female cancer deaths (total deaths=67) in Lucas County from 2016 to 2018, followed by breast (total deaths=32) and colorectal cancers (total deaths=24) *(Source: Ohio Public Health Data Warehouse, 2016-2018).*

The following graph shows the Lucas County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer in comparison to the Healthy People 2020 objective.



(Source: Ohio Public Health Data Warehouse, CDC Wonder, Healthy People 2020)
Note: Healthy People 2020 target is not race specific

The following graph shows cancer as a percent of total deaths in Lucas County African American adults.

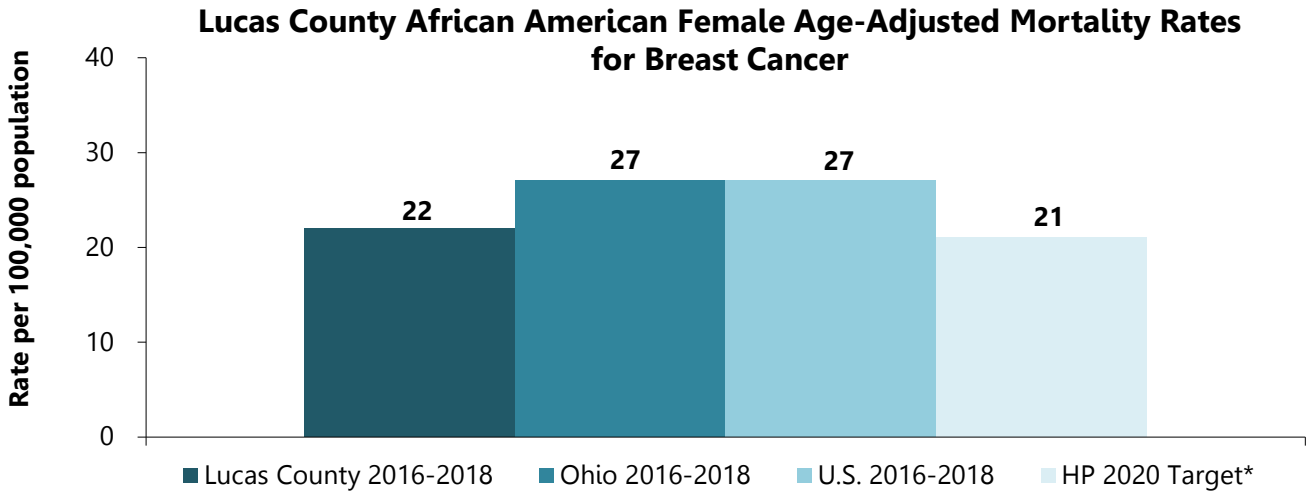


(Source: Ohio Public Health Data Warehouse, 2016-2018)

Breast Cancer

- Sixty-one percent (61%) of Lucas County African American females reported having had a clinical breast examination in the past year.
- More than half (55%) of Lucas County African American females over the age of 40 had a mammogram in the past year.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommend that those 40 to 44 years of age have the option to begin annual mammography, those 45 to 54 should undergo annual mammography, and those 55 years of age and older may transition to biennial mammography or continue annual mammography. Women should continue mammography as long as overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual magnetic resonance imaging (MRI) is recommended in addition to mammography, typically starting at age 30 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the African American Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for breast cancer in comparison with the Healthy People 2020 objective.

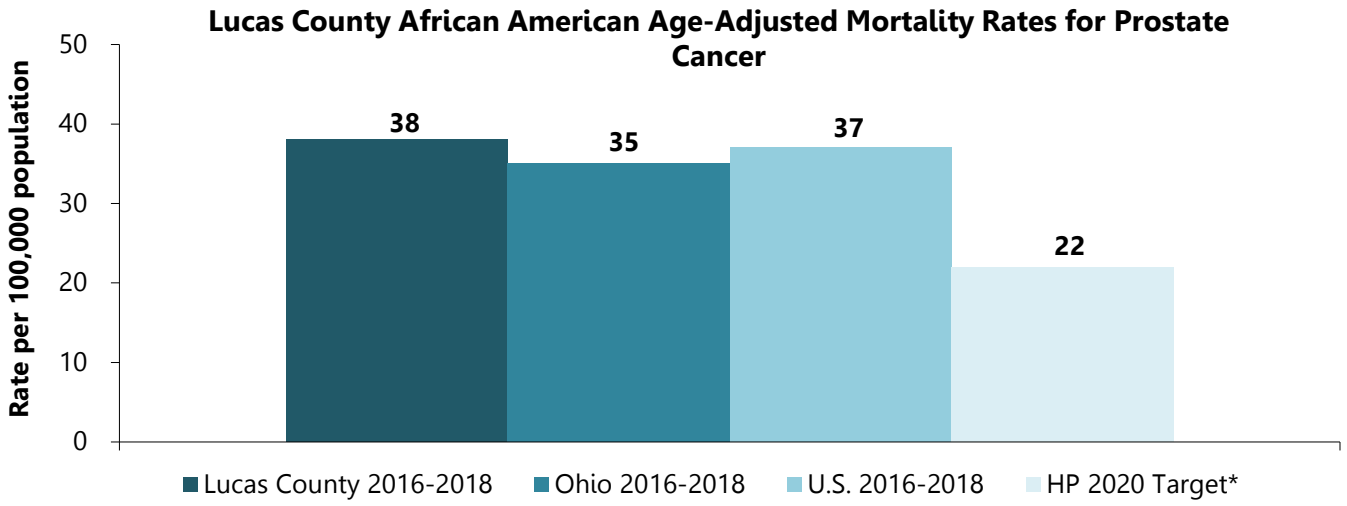


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)
**Healthy People 2020 target is not race specific*

Prostate Cancer

- ODH statistics indicate that prostate cancer accounted for 11% of all African American male cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- No organizations presently endorse routine prostate cancer screening for men at average risk because of concerns about the high rate of overdiagnosis (detecting disease that would never have caused symptoms or harm), along with the significant potential for serious side effects associated with prostate cancer treatment. The American Cancer Society recommends that beginning at age 50, men who are at average risk of prostate cancer and have a life expectancy of at least 10 years have a conversation with their health care provider about the benefits and limitations of PSA testing and make an informed decision about whether to be tested based on their personal values and preferences. Men at high risk of developing prostate cancer (Black men or those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at age 40 *(Source: American Cancer Society, Facts & Figures 2019).*

The following graph shows the African American Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for prostate cancer in comparison with the Healthy People 2020 objective.

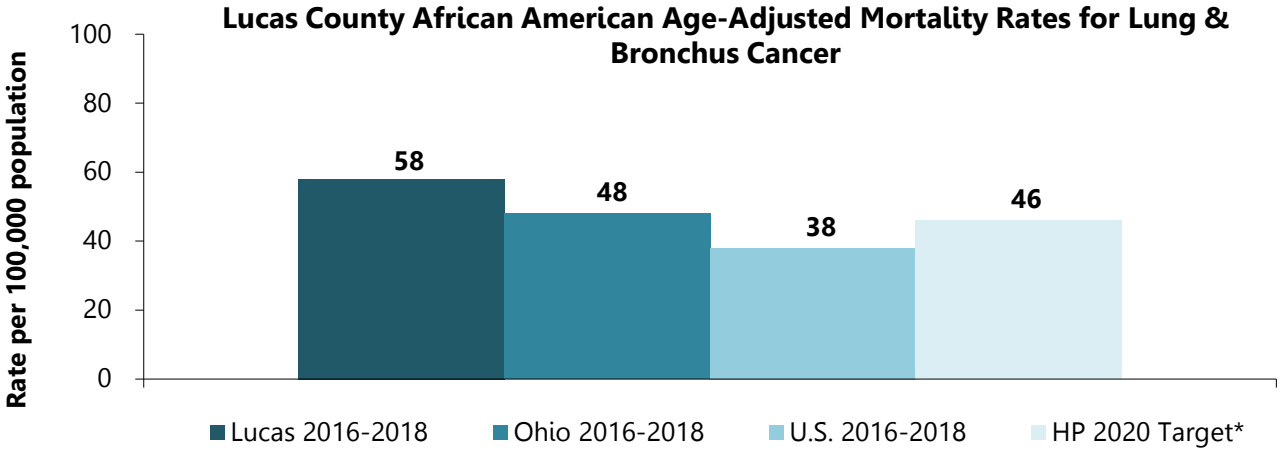


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)
**Healthy People 2020 target is not race specific*

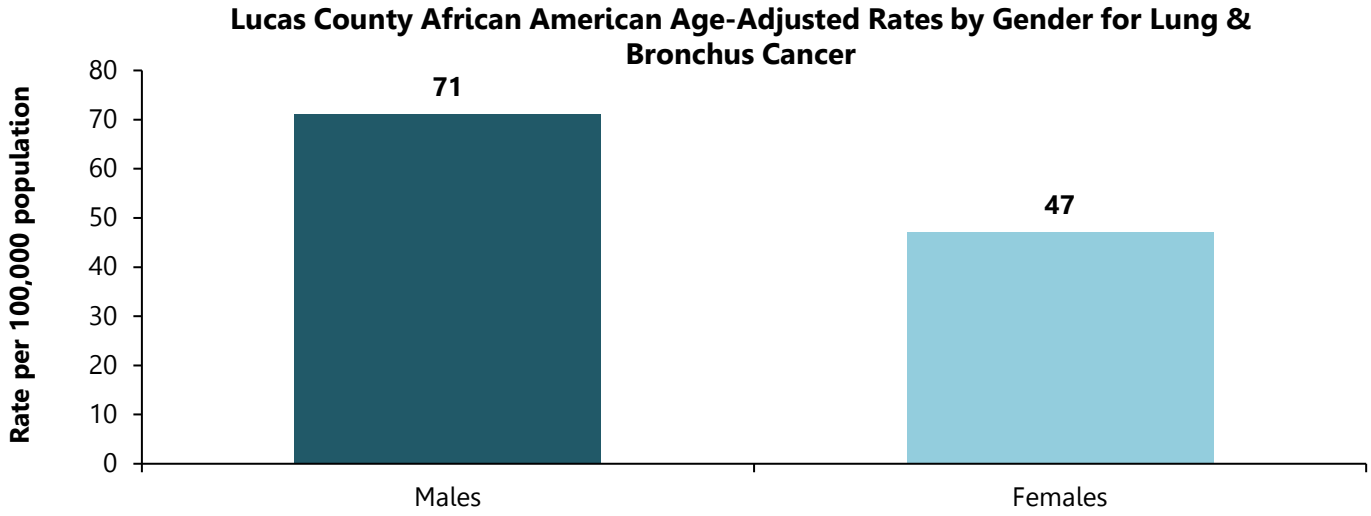
Lung Cancer

- In Lucas County, 18% of African American male adults were current smokers and 16% were former smokers.
- According to the American Cancer Society, smoking causes approximately 80% lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show the African American Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for lung and bronchus cancer in comparison with the Healthy People 2020 objective, as well as by gender.



**Healthy People 2020 Target data is for lung cancer only. Healthy People 2020 target is not race specific*
(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)

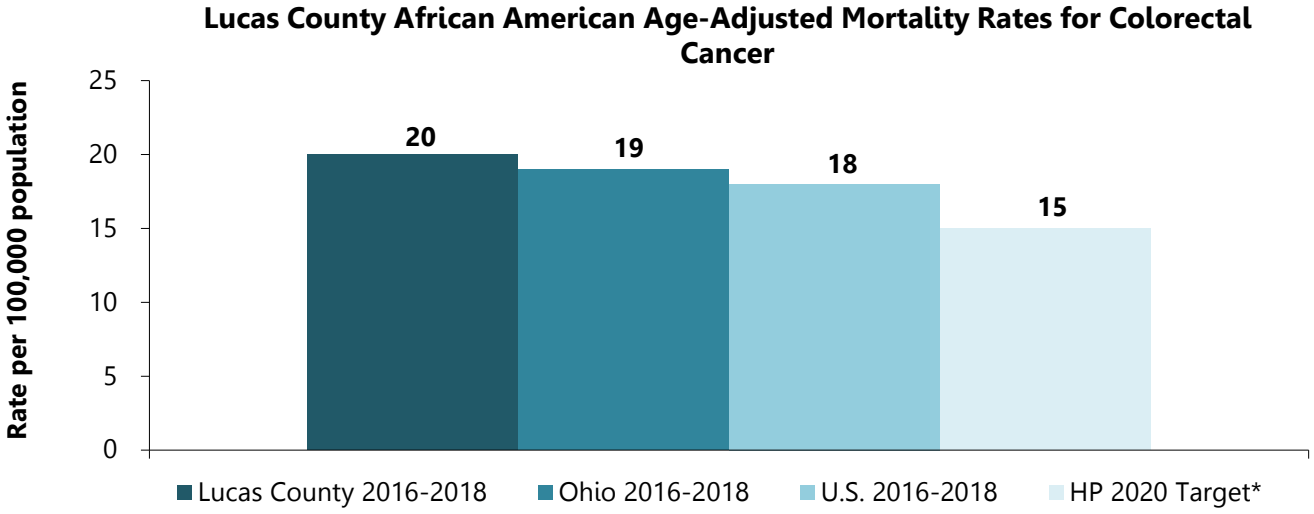


(Source: Ohio Public Health Data Warehouse 2016-2018)

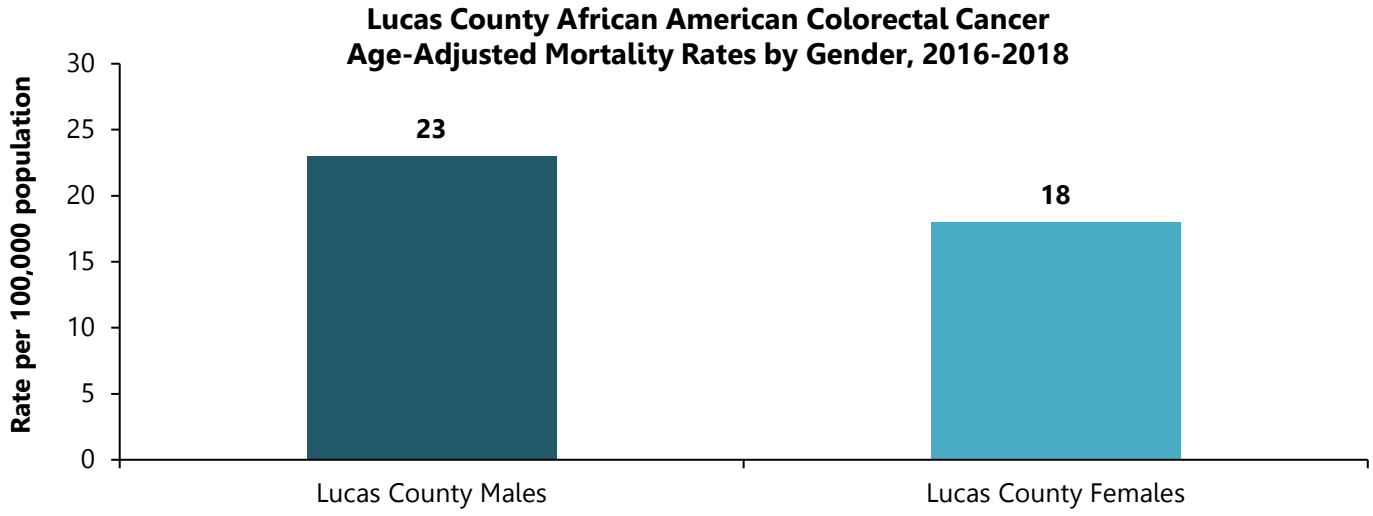
Colorectal Cancer

- ODH indicates that colorectal cancers accounted for 10% of all African American male and African American female cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- Modifiable factors that increase colorectal cancer risk include obesity, physical inactivity, long-term smoking, high consumption of red or processed meat, low calcium intake, moderate to heavy alcohol consumption, and very low intake of fruits and vegetables and whole-grain fiber. Hereditary and medical factors that increase risk include a personal or family history of colorectal cancer and/or polyps, certain inherited genetic conditions, a personal history of chronic inflammatory bowel disease, and type 2 diabetes *(Source: American Cancer Society, Facts & Figures 2020).*
- Screening can prevent colorectal cancer through the detection and removal or precancerous growths, as well as detect cancer at an early stage. Regular screenings with either stool tests or exams (e.g., colonoscopy) results in a reduction in premature colorectal cancer death. New guidelines from the American Cancer Society recommend men and women at average risk for colorectal cancer be screened starting at age 45 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show African American Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for colorectal cancer in comparison with the Healthy People 2020 objective, as well as by gender.



(Source: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)



(Source: Ohio Public Health Data Warehouse 2016-2018)

Lucas County African American Incidence of Cancer, 2013-2017

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Prostate	313	17.5%
Breast	274	15.4%
Lung and Bronchus	272	15.2%
Colon & Rectum	178	10.0%
Other Sites/Types	113	6.3%
Kidney & Renal Pelvis	93	5.2%
Pancreas	62	3.5%
Non-Hodgkins Lymphoma	55	3.1%
Uterus	53	3.0%
Bladder	47	2.6%
Leukemia	43	2.4%
Multiple Myeloma	41	2.3%
Liver & Intrahepatic Bile Duct	40	2.2%
Thyroid	36	2.0%
Stomach	36	2.0%
Oral Cavity & Pharynx	35	2.0%
Esophagus	20	1.1%
Brain and Other CNS	20	1.1%
Larynx	17	0.1%
Cervix	13	0.7%
Hodgkins Lymphoma	12	0.7%
Ovary	11	0.6%
Melanoma of Skin	1	0.1%
Testis	0	0.0%
Total	1,785	100%

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 2/7/20)

2019-2021 Cancer Estimates for African Americans

- New Cases
  - About 202,260 new cancer cases and 73,030 cancer deaths are expected to occur among Blacks in 2019. African Americans have the highest death rate and shortest survival of any racial and ethnic group in the United States. The cause for these inequities are complex and reflect the social and economic disparities and cultural differenced that affect cancer risk, as well as differenced in access to high-quality care.
  - About 98,020 cancer cases in Black men and 104,240 cases in Black women are expected to be newly diagnosed in 2019. Prostate cancer in the most commonly diagnosed cancer for Black men and breast cancer is the most commonly diagnosed in black women.
  - About 1 in 3 Black men and women will be diagnosed with cancer in their lifetime.
- Deaths
  - About 36,840 Black men and 36,190 Black women are expected to die from cancer in 2019. Lung cancer accounts for the most cancer deaths.
  - About 1 in 5 will die from cancer in their lifetime.

(Source: American Cancer Society, Cancer Facts & Figures for African Americans, 2019-2021)

Chronic Disease: African American Arthritis

Key Findings

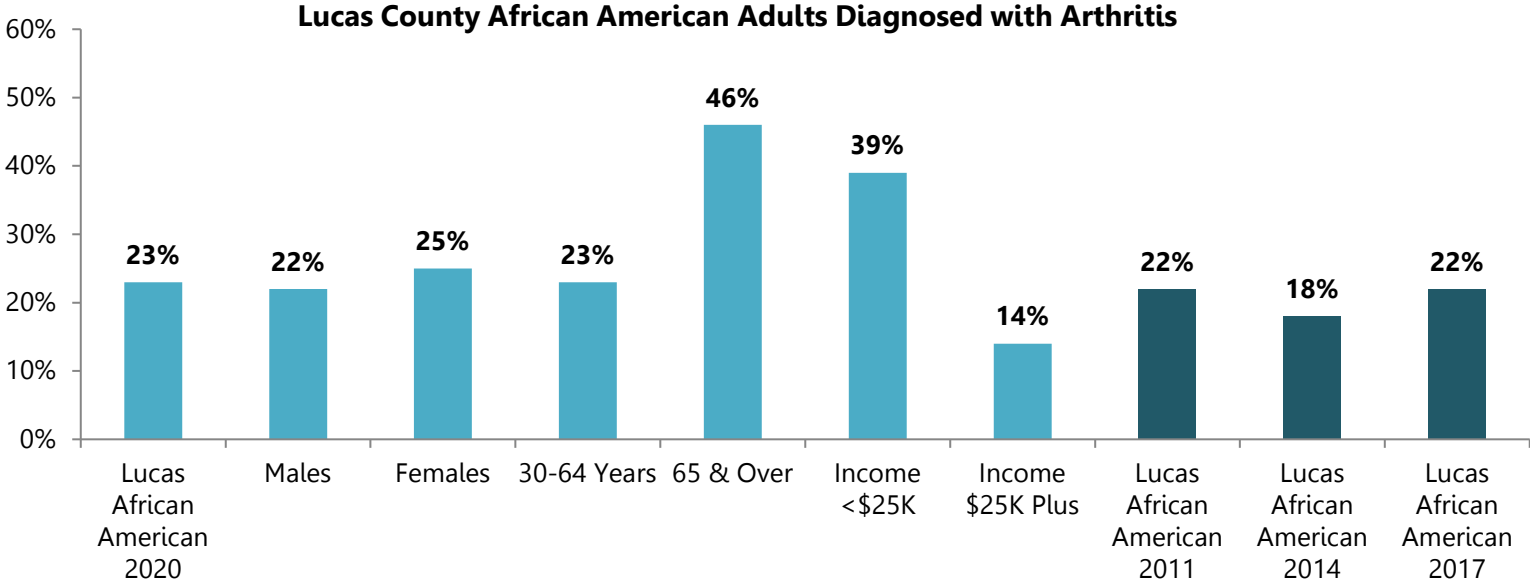
Twenty-three percent (23%) of Lucas County African American adults were diagnosed with arthritis.

Arthritis

- Twenty-three percent (23%) of Lucas County African American adults were diagnosed with some form of arthritis, increasing to 46% of those over the age of 65.
- Of those who were diagnosed, 65% were currently receiving treatment.

23% of Lucas County African American were diagnosed with arthritis.

The following graph shows the percentage of Lucas County African American adults who were diagnosed with arthritis. Examples of how to interpret the information include: 23% of African American adults were diagnosed with arthritis, including 25% of females and 46% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Diagnosed with arthritis	31%	22%	18%	22%	23%	28%	25%

Chronic Disease: African American Asthma

Key Findings

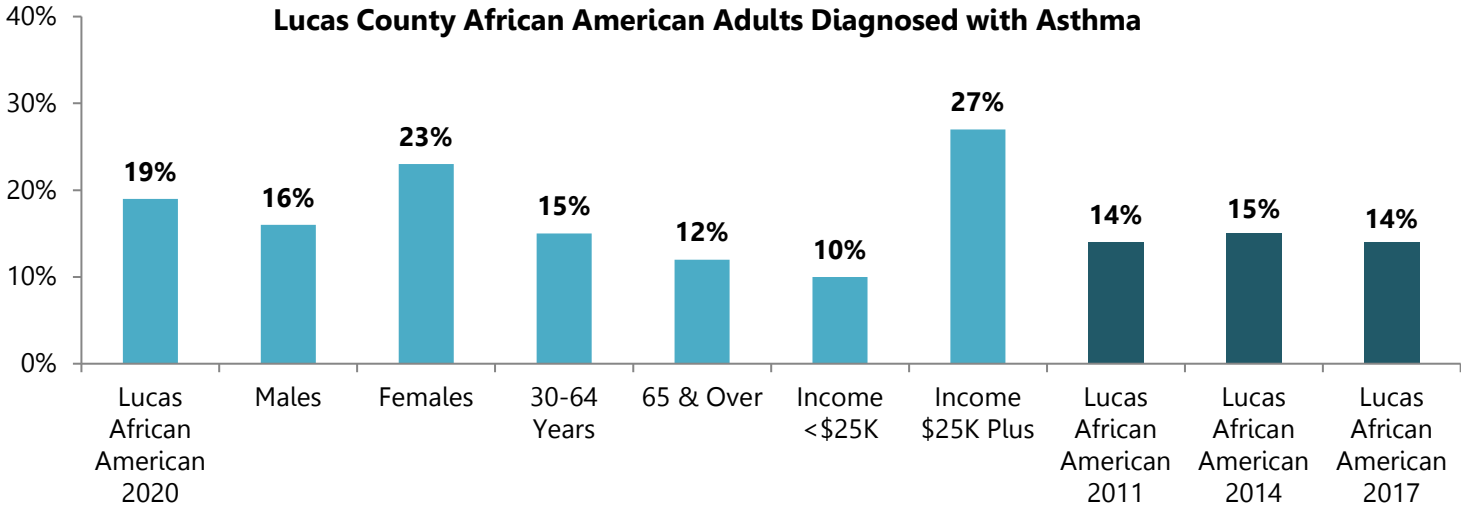
In 2020, 19% of Lucas County African American adults were diagnosed with asthma.

Asthma and Other Respiratory Disease

- In 2020, 19% of Lucas County African American adults had been diagnosed with asthma, increasing to 27% of those with incomes of $25,000 or more.
- Sixty-nine percent (69%) of Lucas County African American adults with asthma were currently receiving treatment for the diagnosis.
- Five percent (5%) of Lucas County African American adults were diagnosed with chronic obstructive pulmonary disorder (COPD).
- Sixty-seven percent (67%) of African American adults were diagnosed with chronic obstructive pulmonary disorder (COPD) were currently receiving treatment.
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; and infections linked to the flu, colds, and respiratory viruses *(Source: CDC, 2017).*
- Chronic lower respiratory disease was the sixth leading cause of death in Lucas County African American adults and the sixth leading cause of death in African American Ohio adults in 2016 to 2018 *(Source: Ohio Public Health Data Warehouse 2016-2018).*

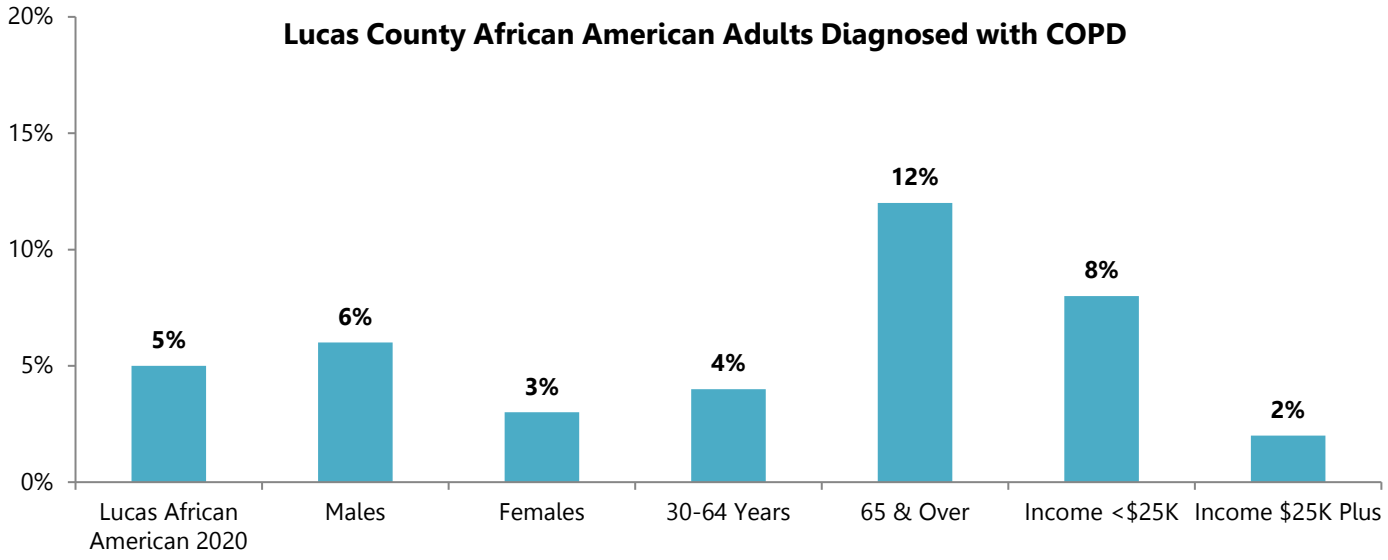
Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Diagnosed with asthma	15%	14%	15%	14%	19%	16%	18%

The following graph shows the percentage of Lucas County African American adults who were diagnosed with asthma. Examples of how to interpret the information include: 19% of African American adults were diagnosed with asthma, including 23% of females and 27% of adults with incomes of $25,000 or more.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

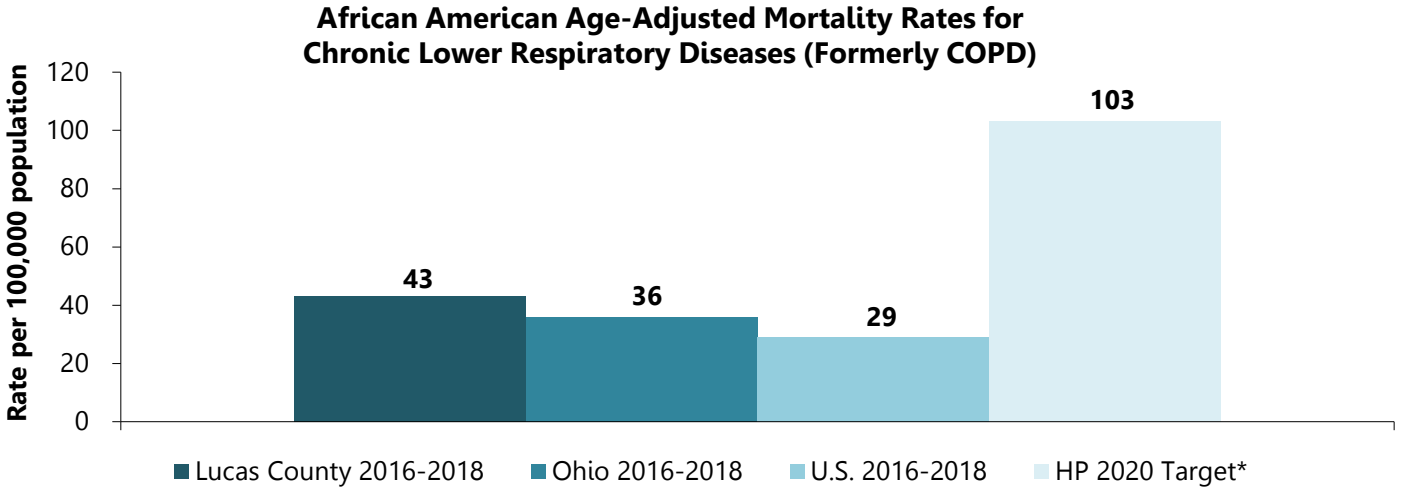
The following graph shows the percentage of Lucas County African American adults who were diagnosed with COPD. Examples of how to interpret the information include: 5% of African American adults were diagnosed with COPD, including 8% of adults with incomes less than $25,000 and 12% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the African American Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD) in comparison with the Healthy People 2020 objective. The graph shows:

- From 2016 to 2018, Lucas County's age-adjusted mortality rate for chronic lower respiratory disease was higher than the Ohio and U.S. rates and lower than the Healthy People 2020 target objective rate.



(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)
**Healthy People 2020's rate is for adults aged 45 years and older. Healthy People 2020 target is not race specific*

Chronic Disease: African American Diabetes

Key Findings

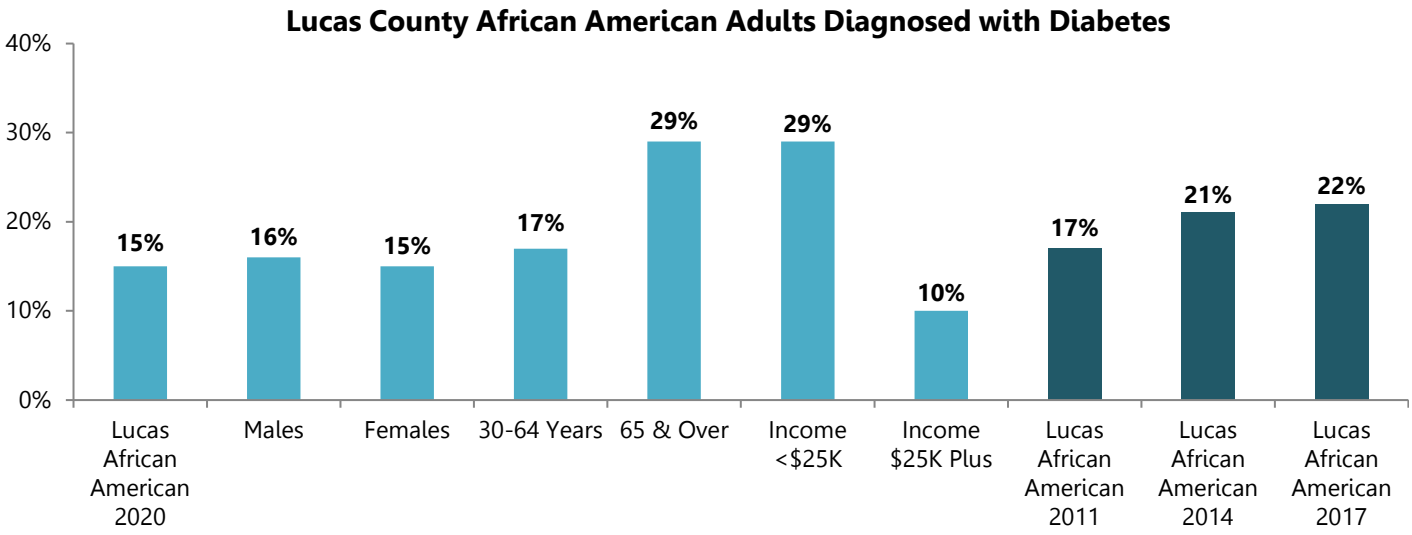
In 2020, 15% of Lucas County African American adults were diagnosed with diabetes at some point in their lifetime. Thirty-eight percent (38%) of African American adults with diabetes rated their health as fair or poor.

15% of Lucas County African American adults were diagnosed with diabetes.

Diabetes

- Fifteen percent (15%) of Lucas County African American adults were diagnosed with diabetes at some point in their lifetime, increasing to 29% of those over the age of 65.
- One hundred percent (100%) of Lucas County African American adults diagnosed with diabetes were receiving treatment.
- A test for A1C measures the average level of blood sugar over the past three months. Eight percent (8%) of Lucas County African American adults reported getting their A1C checked three or more times in the past year. Ten percent (10%) said two times, 26% said one time, 43% said none and 13% said they did not know if they had gotten their A1C checked within the past year.
- Thirty-eight percent (38%) of Lucas County African American adults with diabetes rated their health as fair or poor.
- Lucas County African American adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - Overweight or obese (89%)
  - High blood cholesterol (29%)
  - High blood pressure (22%)

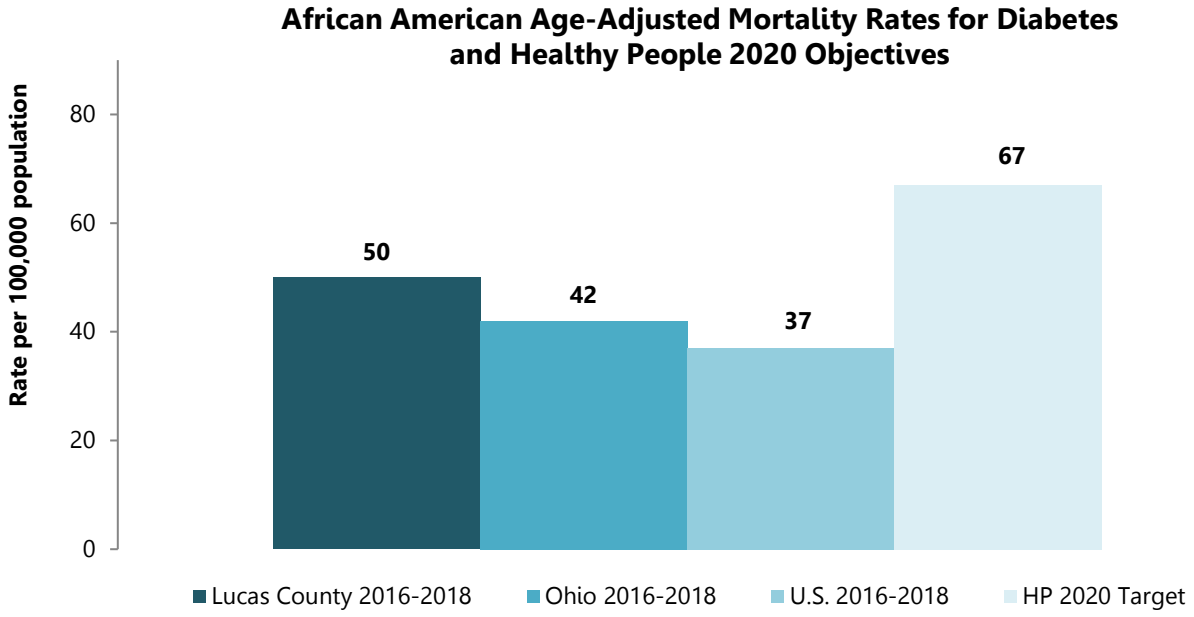
The following graph shows the percentage of Lucas County African American adults who were diagnosed with diabetes. Examples of how to interpret the information include: 15% of African American adults were diagnosed with diabetes, including 15% of females and 29% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show prevalence of diabetes by gender and the age-adjusted mortality rates from diabetes for Lucas County and Ohio residents with comparison to the Healthy People 2020 target objective.

- From 2016 to 2018, Lucas County's age-adjusted diabetes mortality rate was slightly greater than the Ohio and the U.S. rates, but lower than the Healthy People 2020 target objective.



**The Healthy People 2020 rate is for all diabetes-related deaths. Healthy People 2020 target is not race specific (Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2016-2018, Healthy People 2020)*

Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Diagnosed with diabetes	22%	17%	21%	22%	15%	13%	15%

Chronic Disease: African American Quality of Life

Key Findings

In 2020, 45% of Lucas County African American adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were arthritis/rheumatism (48%); back or neck problems (42%); stress, depression, anxiety and emotional problems (32%); vision problems (31%); and chronic pain (25%).

45% of African American adults were limited in some way because of a physical, mental or emotional problem.

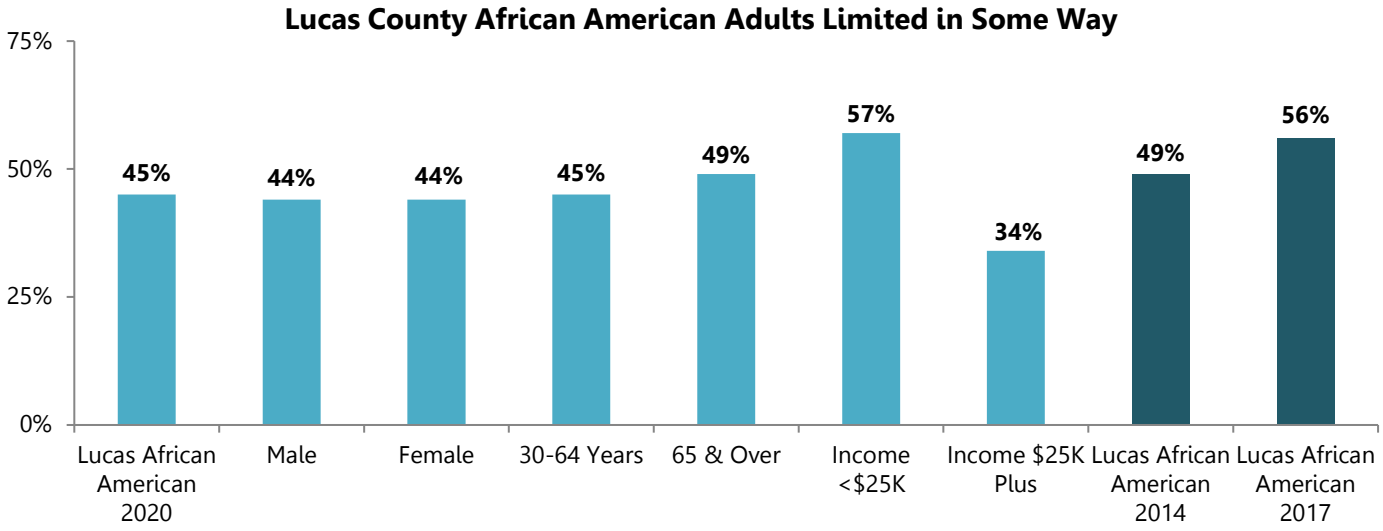
Impairments and Health Problems

- Forty-five percent (45%) of Lucas County African American adults were limited in some way because of a physical, mental or emotional problem.
- Those who were limited in some way reported the following most limiting problems or impairments:
  - Arthritis/rheumatism (48%)
  - Back or neck problems (42%)
  - Stress, depression, anxiety, or emotional problems (32%)
  - Eye/vision problems (31%)
  - Chronic pain (25%)
  - Walking problems (23%)
  - Chronic illness (23%)
  - Sleep problems (23%)
  - Dental problems (17%)
  - Lung/breathing problems (11%)
  - Fractures, bone/joint injuries (14%)
  - Substance dependency (8%)
  - Drug addiction (6%)
  - Fitness level (6%)
  - Memory loss (6%)
  - Learning disability (5%)
  - Mental health illness/disorder (3%)
  - Hearing problems (3%)
  - Confusion (2%)
  - Other impairments/problems (5%)
- In the past year, Lucas County African American adults reported needing the following services or equipment: eyeglasses or vision services (34%), pain management (12%), canes (10%), help with routine needs (9%), help with personal care needs (7%), walkers (5%), medical supplies (2%), wheelchairs (2%), wheelchair ramps (2%), personal emergency response systems (2%), mobility aids or devices (2%), special beds (2%), oxygen or respiratory support (1%), and hearing aids or hearing care (1%).
- Thirty percent (30%) of Lucas County African American adults had fallen in the past year, increasing to 28% of those 65 and older.

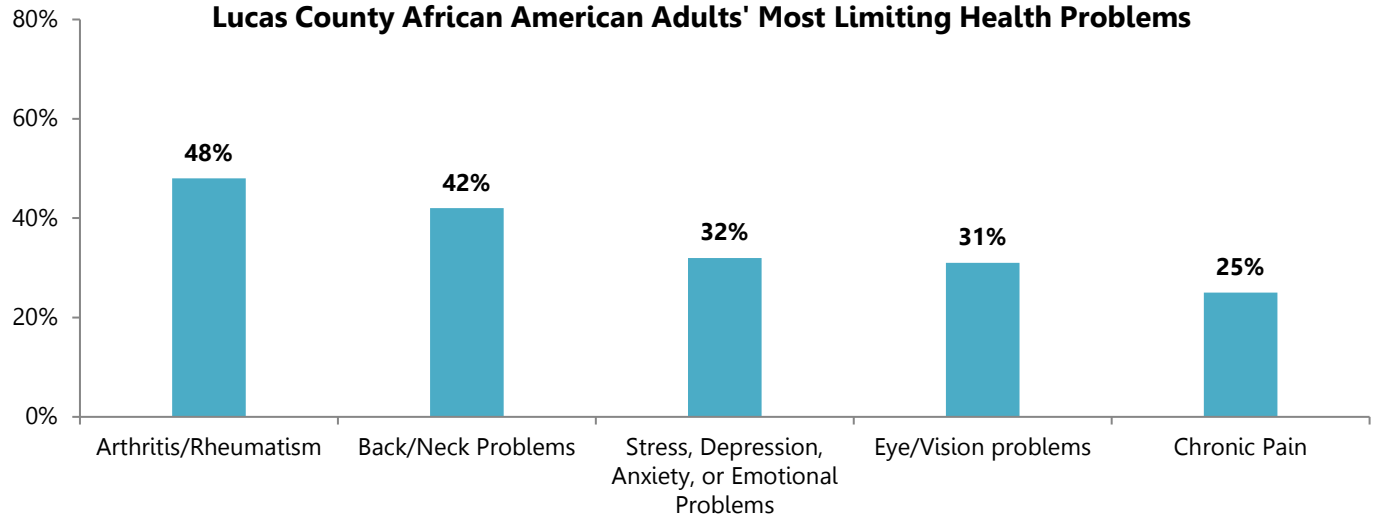
Adult Comparisons	Lucas County African Americans 2007	Lucas County African Americans 2011	Lucas County African Americans 2014	Lucas County African Americans 2017	Lucas County African Americans 2020	Ohio African Americans 2018	U.S. African Americans 2018
Limited in some way because of a physical, mental, or emotional problems	53%	N/A	49%	56%	45%	N/A	N/A

N/A – Not Available

The following graphs show the percentage of Lucas County adults that were limited in some way and the most limiting health problems. Examples of how to interpret the information on the first graph include: 45% of Lucas County adults were limited in some way, including 44% of males and 49% of those ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



Healthy People 2020*

Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Lucas County African American 2020	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	48%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
**Healthy People 2020 target is not race specific.*
(Sources: Healthy People 2020 Objectives, 2019/2020 Lucas County Health Assessment)

Social Conditions: African American Social Determinants of Health

Key Findings

In 2020, 19% of Lucas County African American adults had to choose between paying bills and buying food. Eighteen percent (18%) of Lucas County African American adults experienced four or more adverse childhood experiences (ACEs) in their lifetime.

Healthy People 2020

- Healthy People 2020 developed five key determinants as a "place-based" organizing framework. These five determinants include:
  - Economic stability
  - Education
  - Social and community context
  - Health and health care
  - Neighborhood and built environment

Economic Stability

- Lucas County African American adults reported the following about their housing situation:
  - Had housing (87%)
  - Had housing, but were worried about losing housing in the future (21%)
  - Did not have housing (1%)
  - Don't know (2%)

14% of Lucas County African American adults experienced more than one food insecurity issue in the past year.

- Lucas County African American adults attempted to get assistance from the following social service agencies: Job & Family Services/JFS (23%), food pantries (13%), Salvation Army (8%), Pathway (7%), friend or family member (6%), other charities (6%), place of worship (5%), WIC/health department (5%), United Way (4%), free clinic (2%), legal aid (2%), and somewhere else (8%). Three percent (3%) of African American adults did not know where to look for assistance, and 6% did not qualify for assistance.
- Lucas County African American adults experienced the following food insecurity issues during the past year: had to choose between paying bills and buying food (19%), worried food would run out (11%), food assistance was cut (9%), went hungry/ate less to provide more food for their family (7%), were hungry but did not eat because they did not have money for food (7%), and loss of income led to food insecurity issues (4%).
- Fourteen percent (14%) of Lucas County African American adults experienced more than one food insecurity issue in the past year.
- The median household income in Lucas County was $49,448. The U.S. Census Bureau reports median income levels of $58,642 for Ohio and $65,712 for the U.S. *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*
- Thirty-six percent (36%) of all Lucas County African American residents were living in poverty *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimates).*
- The unemployment rate for Lucas County was 10.6 as of July of 2020 *(Source: Bureau of Labor Statistics, Local Area Unemployment Statistics).*
- There were 203,795 housing units. The owner-occupied housing unit rate was 60%. Rent in Lucas County cost an average of $757 per month *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*

Lucas County African American adults and their loved ones needed the following assistance in the past year:

Type of Assistance	Needed Assistance	Did Not Know Where to Look	Did Not Need Assistance
Acquiring disability benefits	15%	4%	81%
Affordable child care	1%	5%	94%
Clothing	1%	4%	95%
Credit counseling	4%	10%	86%
Dental care	13%	8%	79%
Diapers	1%	2%	97%
Drug or alcohol addiction	4%	1%	95%
Employment	6%	7%	87%
Food	13%	2%	85%
Free tax preparation	8%	8%	84%
Gambling addiction	1%	1%	98%
Electric, gas, or water bills	13%	2%	85%
Health care	16%	4%	80%
Home repair	3%	10%	87%
Legal aid services	4%	3%	93%
Medicare	17%	2%	82%
Mental illness issues including depression	12%	7%	81%
Post incarceration transition issues	2%	1%	97%
Prescription assistance	15%	4%	81%
Rent/mortgage	4%	8%	88%
Septic/well repairs	1%	1%	98%
Transportation	4%	3%	93%
Unplanned pregnancy	1%	1%	98%
Utilities	7%	7%	86%

Social and Community Context

- Lucas County African American adults experienced the following in the past year:
  - Death of a family member or close friend (49%)
  - A close family member had to go to the hospital (35%)
  - Had bills they could not pay (24%)
  - Someone in their household lost their job/had their hours at work reduced (13%)
  - Moved to a new address (12%)
  - Decline in their own health (11%)
  - Someone close to them had a problem with drinking or drugs (8%)
  - Had someone homeless living with them or sleeping on their couch (8%)
  - Knew someone who lived in a hotel (7%)
  - Was homeless (5%)
  - Was threatened or abused by someone physically, emotionally, sexually, and/or verbally (5%)
  - Their family as at risk for losing their home (5%)
  - Due to unforeseen circumstances, their household income was cut by 50% (4%)
  - They were a caregiver (3%)
  - Witnessed someone in their family being hit or slapped (3%)
  - Their child was threated or abused by someone physically, emotionally, sexually, and/or verbally (2%)
  - Became separated or divorced (1%)

- Forty-four percent (44%) of Lucas County African American adults reported gambling in the past year. They reported the following types of gambling: lottery/scratch-offs/office pools (73%); casino gambling (36%); poker or other card games, dice, or craps (not at a casino) (8%); sports betting with a bookie/office pools (7%); and bingo (7%).

- Lucas County African American adults reported engaging in some form of gambling:
  - Daily (4%)
  - Every few days (4%)
  - Weekly (5%)
  - Every few weeks (6%)
  - Monthly (3%)
  - Every few months (8%)
  - Once or twice a year (19%)
  - Never (51%)

- Lucas County African American adults experienced the following due to gambling: unable to pay bills (2%), felt the need to lie to hide the extent of their gambling (2%), consumed more alcohol or drugs when gambling (1%), tried to cut down or stop gambling (1%), gambled with larger amounts of money to get the same excitement (1%), someone expressed a concern about their gambling (1%), and lied to family members or others to hide their gambling (1%).

- Fourteen percent (14%) of Lucas County African American adults were threatened with abuse in the past year by the following individuals: a spouse or partner (32%) and someone else (63%).

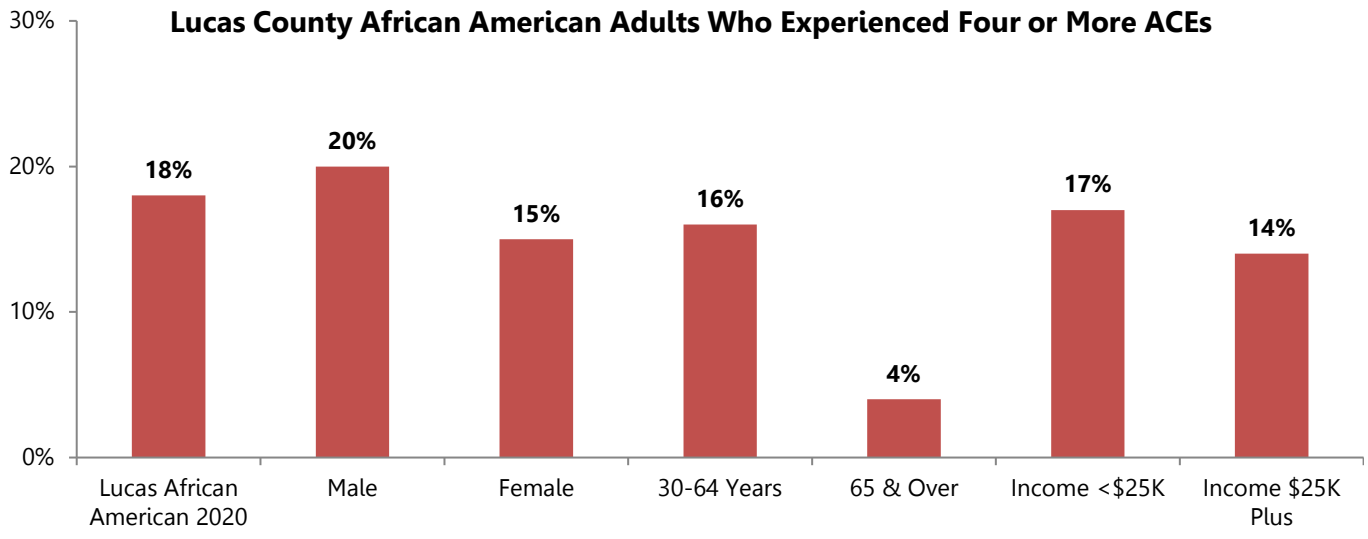
- Ten percent (10%) of Lucas County African American adults were abused (including physical, sexual, emotional, financial and verbal) in the past year by the following individuals: a spouse or partner (85%), a parent (8%), another person from outside the home (8%), and someone else (14%).

- Adverse childhood experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They also include household dysfunction such as witnessed domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development of depression, alcoholism and alcohol abuse; depression; illicit drug use; chronic obstructive pulmonary disease; suicide attempts; and many other health problems throughout a person's lifespan *(SAMHA, Adverse Childhood Experiences, Updated on 7/2/2020).*

- Lucas County African American adults experienced the following adverse childhood experiences (ACEs):
  - Their parents became separated or were divorced (29%)
  - Lived with someone who was a problem drinker or alcoholic (16%)
  - Lived with someone who was depressed, mentally ill, or suicidal (16%)
  - Their parents were not married (16%)
  - Their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (15%)
  - Someone at least five years older than them or an adult touched them sexually (14%)
  - Lived with someone who used illegal stress drugs, or who abused prescription medications (14%)
  - A parent or adult in their home swore at them, insulted them, or put them down (13%)
  - Lived with someone who served time or was sentenced to serve time in prison, jail or correctional facility (12%)
  - Their family did not look out for each other, feel close to each other, or support each other (11%)
  - Someone at least five years older than them or an adult tried to make them touch them sexually (10%)
  - They didn't have enough to eat, had to wear dirty clothing, and had no one to protect them (5%)
  - A parent or adult in their home hit, beat, kicked, or physically hurt them (5%)
  - Someone at least five years older than them or an adult forced them to have sex (2%)

- Eighteen percent (17%) of Lucas County African American adults experienced four or more adverse childhood experiences (ACEs).

The following graph shows the percentage of Lucas County African American adults who experienced four or more adverse child experiences (ACEs) in their lifetime. Examples of how to interpret the information on the graph include: 18% of all Lucas County African American adults had experienced four or more ACEs in their lifetime, including 20% of males and 17% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between African American adults who experienced four or more ACEs in their lifetime and participating in risky behaviors, as well as other experiences. An example of how to interpret the information includes: 36% of African American adults who experienced four or more ACEs had contemplated suicide in the past year, compared to 5% of those who did not experience any ACEs.

Behaviors of Lucas County Adults

*Experienced four or more ACEs vs. Did Not Experience Any ACEs**

African American Adult Behaviors	Experienced four or more ACEs	Did Not Experience Any ACEs
Current drinker (had at least one alcoholic beverage in the past month)	48%	44%
Seriously contemplated suicide (in the past year)	36%	5%
Current smoker (currently smoke on some or all days)	30%	24%
Binge drinker (drank five or more drinks for males and four or more for females on an occasion in the past month)	29%	59%
Misused prescription drugs (used prescription drugs either not prescribed to them or used them to get high or feel more alert in the past six months)	22%	4%
Had two or more sexual partners (in the past year)	18%	2%

**"ACEs indicate adults who self-reported having experienced four or more adverse childhood experiences in their lifetime.*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Veterans Affairs

- As a result of military service during the past 10-15 years, the following have affected African American veterans' immediate family members: access to medical care at a Veterans Affairs facility (16%), post-traumatic stress disorder (PTSD) (13%), had problems getting Veterans Affairs benefits (13%), had problems getting information on Veterans Affairs eligibility and applying (13%), major health problems due to injury (7%), housing issues (6%), incarceration/re-entry (6%), access to mental health treatment (6%), could not find/keep a job (6%), marital problems (4%), suicide completion (4%), access to medical care at a non-Veterans Affairs facility (4%), and substance/drug abuse/overdose (3%).

Reactions to Race

- At work within the past year, 21% of Lucas County African American adults felt they were treated worse than people of other races. Forty percent (40%) felt they were treated the same at work, and 1% reported they were treated better than other races at work.

- Within the past year, when seeking health care, 10% of Lucas County African American adults felt their experiences in the past year were worse than people of other races. Fifty-one percent (51%) felt their experiences were the same, and no adult reported their experiences were better than people of other races when seeking health care.

- More than one-third (33%) of Lucas County African American adults reported feeling emotional distress (such as anger, sad, frustration) or was physical distress (such as experiencing a stomachache, headache, anxiety) as a result of how they were treated based on their race, ethnicity, sex, age, language, culture, religion, nationality, or sexual orientation in the past month.

- During the past month, 27% of Lucas County African American adults experienced physical symptoms (for example, a headache, an upset stomach, tensing of muscles, or a pounding heart) as a result of how they were treated based on their race, increasing to 35% of those with annual incomes of $25,000 or more.

- During the past month, Lucas County African American adults felt emotionally upset as a result of how they were treated because of their:
  - Skin color (24%)
  - Ethnicity (21%)
  - Religion (9%)
  - Culture (8%)
  - Sexual orientation (5%)
  - Disability (4%)
  - Gender identity (1%)

Lucas County African American Adults Experiences When Seeking Health Care*

Demographics	Experiences When Seeking Health Care			
	Worse than People of Other Races	Better than People of Other Races	Same as People of Other Races	Don't Know
Total (African American)	9%	0%	47%	33%
White	1%	10%	53%	34%
Latino of any race	2%	7%	57%	22%

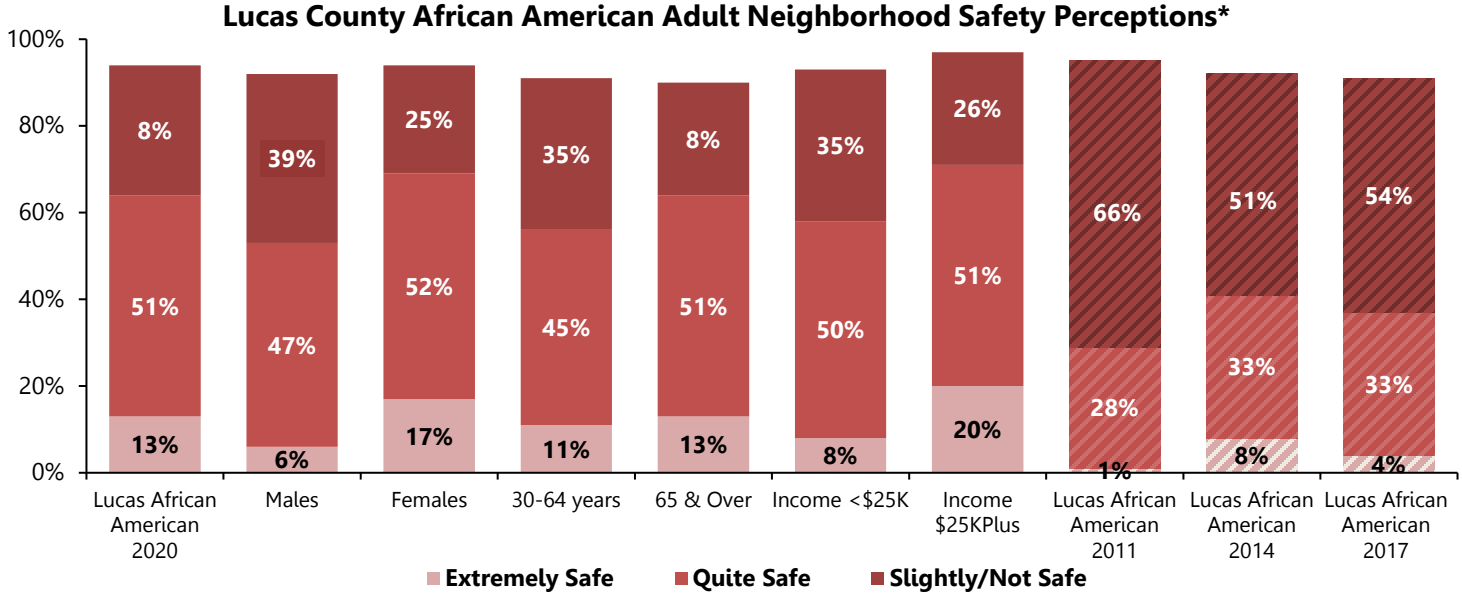
**Percentages may not equal 100% due to the exclusion of data for those who did not have health care and answered multiple responses.*

Neighborhood and Built Environment

- Thirteen percent (13%) of Lucas County African American adults reported that their neighborhood was extremely safe, 51% reported it to be quite safe, 23% reported it to be slightly safe, and 7% reported it to be not safe at all. Seven percent (7%) reported that they did not know how safe from crime their neighborhood was.

The following graph shows the percentage of Lucas County African American adults who described their neighborhood as extremely safe, quite safe and slightly/not safe. Examples of how to interpret the information include: 13% of all Lucas County African American adults described their neighborhood as extremely safe, including 8% of those with annual incomes less than $25,000.

Lucas County African American Adult Neighborhood Safety Perceptions*



**Respondents were asked: "How safe from crime do you consider your neighborhood to be?"*
Note: percentages may not equal 100% due to those who responded "don't know"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

- Seventy percent (70%) of Lucas County African American adults reported deliberately testing all of the smoke detectors in their home within the past year. Nine percent (9%) have never tested the smoke detectors in their home.

- More than one-fourth (28%) of Lucas County African American adults reported the following transportation issues: no car (20%), no driver's license/suspended license (11%), no car insurance (5%), cost of public or private transportation (5%), limited public transportation available or accessible (5%), other car issues/expenses (4%), disabled (2%), no public transportation available or accessible (1%), and cannot afford gas (1%). Eighteen percent (18%) of adults who reported having transportation issues had more than one issue.

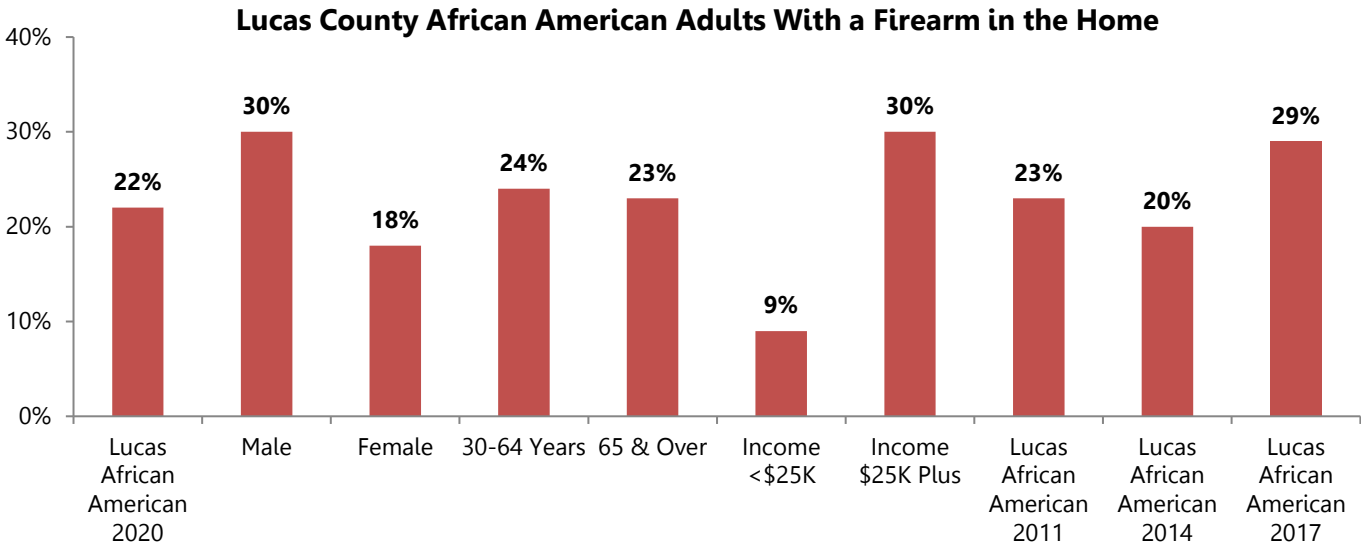
- Lucas County African American adults indicated they use the following forms of transportation regularly: vehicle or family vehicle (86%), ride from a friend or family member (22%), walk (11%), public transportation (8%), bike (3%), and other (8%).

- Lucas County African American adults reported doing the following while driving: eating (32%); talking on hand-held cell phone (37%); texting (21%); using cell phone other than for talking or texting (17%); using Internet/apps/social media on their cell phone (15%); driving without wearing a seatbelt (11%); being under the influence of prescription drugs (5%); being under the influence of recreational drugs (4%); reading (2%); being under the influence of alcohol (2%); and other activities (such as applying makeup, shaving, etc.) (2%). Of adult drivers, 34% had more than one distraction. Fifteen percent (15%) of adults reported they did not drive.

- More than half (22%) of Lucas County African American adults kept a firearm in or around their home. Three percent (3%) of adults reported that their firearms were unlocked and loaded.

- Lucas County African American adults with firearms in or around their home reported the following reasons for having them: protection (79%), hunting or sport (3%), and other reasons (6%).

The following graph shows the percentage of Lucas County African American adults that had a firearm in or around the home. Examples of how to interpret the information include: 22% of all Lucas County African American adults had a firearm in or around the home, including 30% of males and 30% of those with annual incomes of $25,000 or more.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Social Conditions: Environmental Conditions

Key Findings

Lucas County African American adults reported the following as the top four issues that threatened their health in the past year: mold (8%), bed bugs (8%), insects (7%), and rodents (6%). Eight percent (8%) of African American adults reported they had a disaster plan in preparation of a disaster.

8% of African American adults reported that mold threatened their or their family members' health in the past year.

Environmental Health

- Lucas County African American adults thought the following threatened their or their family members' health in the past year:
  - Mold (8%)
  - Bed bugs (8%)
  - Insects (7%)
  - Rodents (6%)
  - Plumbing problems (5%)
  - Safety hazards (structural problems) (5%)
  - Air quality (4%)
  - Temperature regulation (heating and air conditioning) (3%)
  - Moisture issues (2%)
  - Cockroaches (2%)
  - Sewage/wastewater problems (2%)
  - Unsafe water supply/wells (2%)
  - Lice (1%)
  - Chemicals found in household products (1%)
  - Radon (1%)
- Fifteen percent (15%) of Lucas County African American adults reported more than one environmental issue that threatened their or their family members' health in the past year.

Disaster Preparedness

- Lucas County African American households had the following disaster preparedness supplies: cell phone (76%), working smoke detector (59%), working flashlight and working batteries (53%), computer/tablet (50%), three-day supply of nonperishable food for everyone in the household (46%), working battery-operated radio and working batteries (46%), three-day supply of prescription medication for each person who takes prescribed medicines (40%), three-day supply of water for everyone in the household (one gallon of water per person per day) (38%), home land-line telephone (31%), working carbon monoxide detector (29%), communication plan (25%), generator (9%), and disaster plan (8%).
- Seventy-eight percent (78%) of Lucas County African American adults reported having more than one disaster preparedness supply. Seventeen percent (17%) of adults reported having none of the above disaster preparedness supplies.

Health Care Access: Latino Health Care Coverage

Key Findings

Ten percent (10%) of Lucas County Latino adults were without health care coverage in 2020. Those most likely to be uninsured were females (15%) and those with an annual income level of $25,000 or more (11%).

In Lucas County, 10% of Latino adults were uninsured.

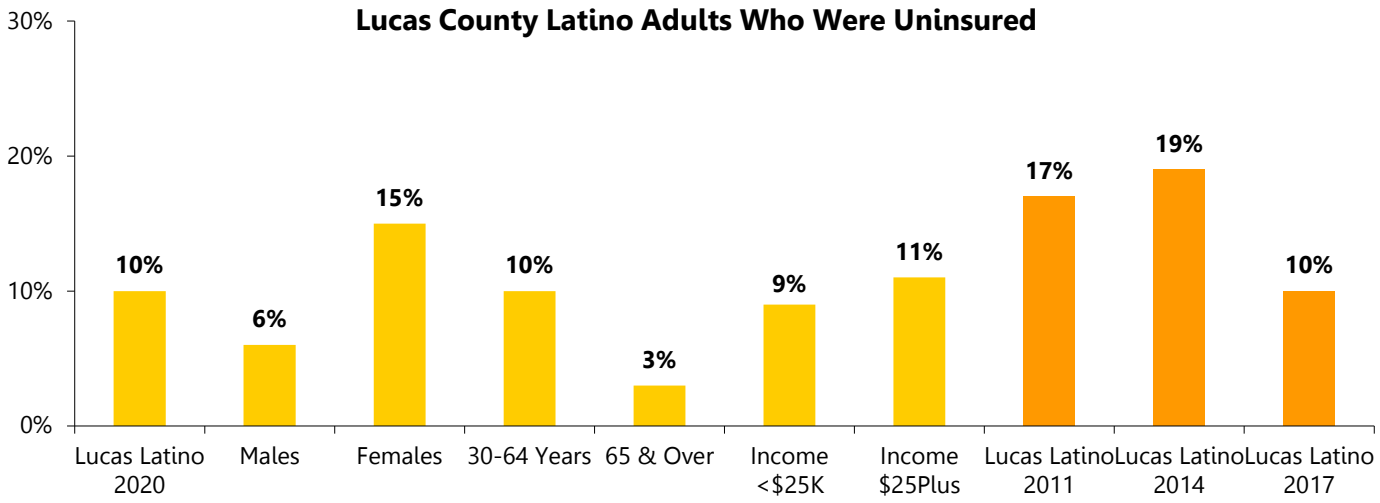
Health Care Coverage

- In 2020, 90% of Lucas County Latino adults had health care coverage, and 10% who were uninsured.
- Sixteen percent (16%) of Lucas County Latino adults with children did not have health care coverage, compared to 4% of those who did not have children living in their household.
- The top reasons uninsured Latino adults gave for being without health care coverage were:
  1. They lost their job or changed employers (38%)
  2. Became ineligible (20%)
  3. Did not think they needed it (18%)
  4. Cost (15%)

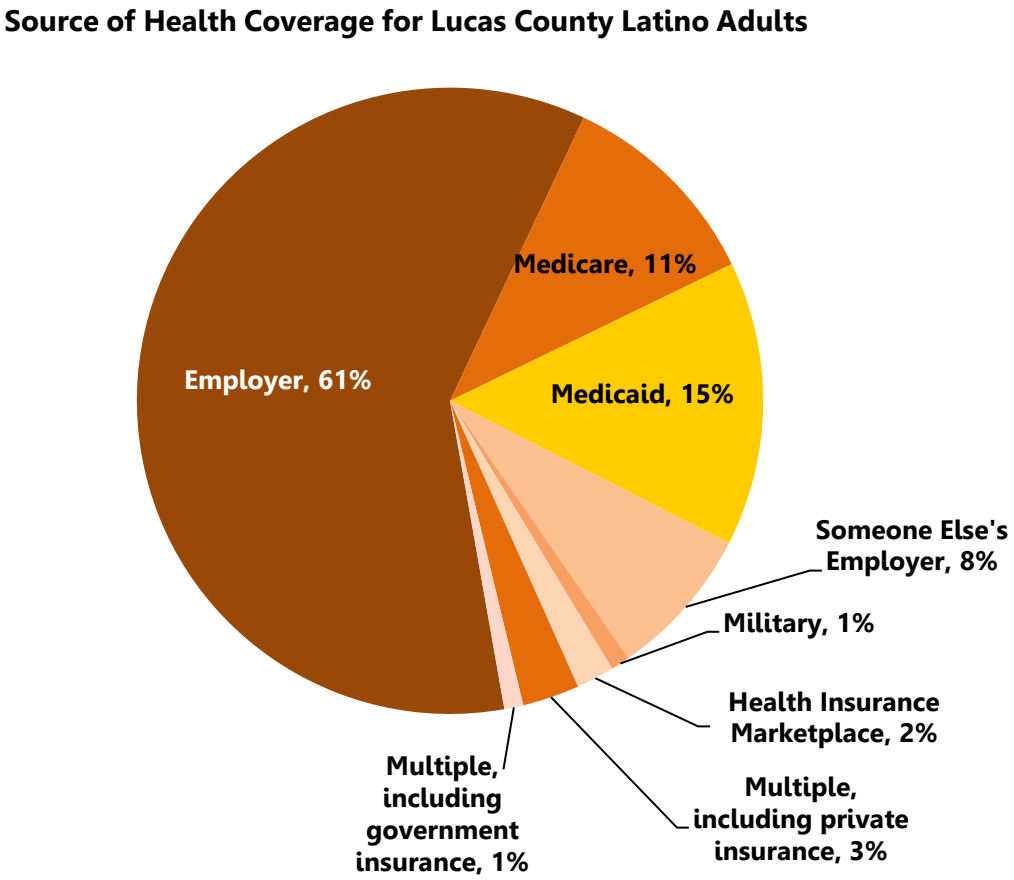
  (Percentages do not equal 100% because respondents could select more than one reason)
- The following types of health care coverage were used: employer (61%); Medicaid or medical assistance (15%); Medicare (11%); someone else's employer (8%); multiple, including private insurance (3%); Health Insurance Marketplace (2%); multiple, including government insurance (1%); and military, CHAMPUS, TriCare, CHAMPVA or the VA (1%).
- Lucas County Latino adults had the following issues regarding their health care coverage:
  - Cost (44%)
  - Opted out of certain coverage because they could not afford it (17%)
  - Could not understand their insurance plan (11%)
  - Limited visits (10%)
  - Provider was no longer covered (8%)
  - Service not deemed medically necessary (7%)
  - Working with their insurance company (6%)
  - Opted out of certain coverage because they did not need it (5%)
  - Service no longer covered (4%)
  - Pre-existing conditions (2%)

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Uninsured	13%	17%	19%	10%	10%	18%	28%

The following graph shows the percentage of Lucas County Latino adults who were uninsured. Examples of how to interpret the information include: 10% of all Lucas County Latino adults were uninsured, including 9% of Latino adults with annual incomes less than $25,000 and 15% of females. The pie chart shows sources of Lucas County Latino adults' health care coverage.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



The following chart shows what is included in Lucas County Latino adults' insurance coverage.

Health Coverage Includes:	Yes	No	Don't Know
Medical	97%	0%	3%
Prescription Coverage	93%	4%	3%
Dental	87%	12%	1%
Vision/Eyeglasses	87%	9%	4%
Immunizations	85%	6%	9%
Preventive Health (e.g., well visits, cancer screenings, blood pressure tests)	84%	3%	13%
Outpatient Therapy (e.g., occupational therapy, physical therapy)	76%	3%	21%
Mental Health	74%	3%	23%
Durable Medical Equipment (e.g., canes, walkers, oxygen)	56%	5%	39%
Hospice	44%	7%	49%
Alcohol and Drug Treatment	40%	8%	52%
Home Care	40%	7%	53%
Skilled Nursing/Assisted Living (e.g., inpatient rehab/therapy)	33%	9%	58%
Transportation	33%	12%	55%

Healthy People 2020
Access to Health Services (AHS)

Objective	Lucas County Latinos 2020	Ohio 2018*	U.S. 2018*	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health insurance	100% age 18-24 80% age 25-34 94% age 35-44 88% age 45-54 96% age 55-64	90% age 18-24 89% age 25-34 91% age 35-44 94% age 45-54 94% age 55-64	85% age 18-24 84% age 25-34 87% age 35-44 90% age 45-54 93% age 55-64	100%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
(Sources: Healthy People 2020 Objectives, 2018 BRFSS, 22019/2020 Lucas County Health Assessment)
**Ohio/ U.S. percentages and Healthy People target are not race specific.*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Care Access: Latino Access and Utilization

Key Findings

Ten percent (10%) of Lucas County Latino adults went outside of Lucas County for health care services in the past year. Twenty-one percent (21%) of Lucas County Latino adults looked for a program to help with depression, anxiety, or some mental health problem.

During the past year, 66% of Latino adults did not receive medical care due to cost/no insurance.

Health Care Access and Utilization

- Lucas County Latino adults usually visited the following places for health care services when they were sick or needed advice:
  - Doctor's office (86%)
  - Urgent care center (38%)
  - Hospital emergency room (19%)
  - Family and friends (17%)
  - Internet (13%)
  - Chiropractor (12%)
  - Alternative therapies (6%)
  - In-store health clinic (4%)
  - Community health center (4%)
  - Veteran's Affairs (VA) (2%)
  - Called 9-1-1/used an ambulance service (2%)
  - Telemedicine (2%)
  - Some other place (1%)
  - Three percent (3%) of Latino adults indicated they had no usual place for health care services.

- The following prevented Lucas County Latino adults from getting medical care in the past year: cost/no insurance (66%), no need to go (12%), office was not open when they could get there (2%), too long of a wait for an appointment (1%), their provider did not take their insurance (1%), too embarrassed to seek help (1%), concerned they would be treated differently (1%), and other reasons (2%).

Health and Health Care for Hispanics in the United States

Hispanics face greater barriers to accessing care and receive less care than whites. For example:

- One in four (25%) of Hispanic adults ages 18-64 are uninsured, compared to 8% of white adults in the same age range
- More than one in five (22%) of Hispanic adults went without care due to cost, compared to 13% of white adults.
- One in four (25%) of Hispanic adults report no usual source of care, compared to 14% of white adults.
- Twenty-five percent (25%) of Hispanic adults report no health care visit in the past year, compared to 15% of white adults.
- Forty-six percent (46%) of Hispanic adults did not visit a dentist in the past year, compared to 32% of white adults.

Although uninsured rates for Hispanics declined under the Affordable Care Act, Hispanics are still more likely to be uninsured than whites.

- From 2013-2017, the uninsured rate among non-elderly Hispanic adults decreased from 40% to 25%, a 15% decrease. During the same time period, uninsured rates decreased from 15% to 8% for non-elderly white adults.
- From 2013-2017, the uninsured rate among Hispanic children decreased from 12% to 8%, a 4% decrease. During the same time period, uninsured rates decreased from 6% to 4% for white children.

(Source: Kaiser Family Foundation, Health and Health Care for Hispanics in the U.S., Updated, May 10, 2019)

- Ten percent (10%) of Lucas County Latino adults went outside of Lucas County for health care services in the past year. Those who went outside of Lucas County for health services gave the following reasons: the wait list was too long in Lucas County (38%), there was a better quality program (23%), service was not available locally (15%), had insurance restrictions (15%), did not like local services/provider (8%), went there because they used to live there (8%), word of mouth (8%), and other (8%).

- More than one-third (34%) of Lucas County Latino adults did not get their prescriptions from their doctor filled in the past year.

- Lucas County Latino adults reported the following reasons for not getting their prescriptions filled in the past year: too expensive (42%), did not think they needed it (26%), no generic equivalent of what was prescribed (23%), stretched current prescription by taking less than what was prescribed (21%), side effects (16%), did not have any prescriptions to be filled (14%), no insurance (9%), they were already taking too many medications (9%), transportation (5%), and fear of addiction (2%).

- A living will is a written legal document that details adults' wishes for end-of-life medical care if they are unable to make decisions for themselves. Sixteen percent (16%) of Lucas County Latino adults reported they had a living will, increasing to 20% of those with annual incomes more than $25,000 and increasing to 48% of those over the age of 65.

- A durable power of attorney is a written legal document in which people name an individual who will make medical decisions for them when they are unable to do so. Nine percent (9%) of Lucas County Latino adults had a durable power of attorney, increasing to 32% of those over the age of 65.

- Of the Lucas County Latino adults who did not have a living will or durable power of attorney, 34% had discussed their medical wishes with a family member or loved one.

Hispanic/Latino Insurance Coverage

It is significant to note that Hispanics have the highest uninsured rates of any racial or ethnic group within the United States.

- In 2017, the Census Bureau reported that 49.0 percent of Hispanics had private insurance coverage, as compared to 75.4 percent for non-Hispanic whites. Among Hispanic subgroups, coverage varied as follows: 46.7 percent of Mexicans, 54.6 percent of Puerto Ricans, 55.9 percent of Cubans, 41.9 percent of Central Americans.

- In 2017, 38.2 percent of all Hispanics had public health insurance coverage, as compared to 33.7 percent for non-Hispanic whites. Public health insurance coverage varied among Hispanic subgroups: 38.4 percent of Mexicans, 45.1 percent of Puerto Ricans, 35.6 of Cubans, and 34.4 percent of Central Americans.

- Those without health insurance coverage varied among Hispanic subgroups: 19.3 percent of Mexicans, 7.9 percent of Puerto Ricans, 13.7 percent of Cubans and 27.2 percent of Central Americans. In 2017, 17.8 percent of the Hispanic population was not covered by health insurance, as compared to 5.9 percent of the non-Hispanic white population.

(Source: U.S. Department of Health and Human Services Office of Minority Health, Profile: Hispanic/Latino Americans, Updated, August 22, 2019)

Availability of Services

Lucas County Latino Adults Able to Access Assistance Programs/Services

Types of Programs (% of all Latino adults who looked for the programs)	Lucas County Latino adults who have looked but have NOT found a specific program	Lucas County Latino adults who have looked and have found a specific program
Depression, anxiety, or some mental health problem (21% of all adults looked)	33%	67%
Detoxification for opiates/heroin (8% of all adults looked)	100%	0%
Disability (8% of all adults looked)	78%	22%
Assistance with in-home care for an elderly or disabled adult (8% of all adults looked)	78%	22%
Assist in care for the disabled (either in-home or out-of-home) (7% of all adults looked)	75%	25%
Weight problem (6% of all adults looked)	57%	43%
Alcohol abuse (5% of all adults looked)	67%	33%
Assist in care for the elderly (either in-home or out-of-home, or adult day care) (4% of all adults looked)	80%	20%
Drug abuse (4% of all adults looked)	80%	20%
End-of-life care or hospice care (4% of all adults looked)	0%	100%
Day care for an elderly or disabled adult (4% of all adults looked)	0%	100%
Tobacco cessation (3% of all adults looked)	67%	33%
Assisted living program for an elderly or disabled adult (3% of all adults looked)	0%	100%
Marital or family problems (2% of all adults looked)	50%	50%
Cancer support group/counseling (2% of all adults looked)	0%	100%
Disabled adult program (2% of all adults looked)	0%	100%
Family planning (1% of all adults looked)	100%	0%
Assistance with out-of-home placement for an elderly or disabled adult (1% of all adults looked)	0%	100%

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Care Access: Latino Preventive Medicine

Key Findings

Sixty-five percent (65%) of Lucas County Latino adults had a flu vaccine during the past year. Seventy percent (70%) of Latino adults ages 65 and older had a pneumonia vaccine at some time in their life.

Preventive Medicine

- Sixty-five percent (65%) of Lucas County Latino adults had a flu vaccine during the past year, increasing to 87% of those 65 and older.
- More than one-quarter (31%) of Lucas County Latino adults have had a pneumonia vaccine in their life, increasing to 70% of those ages 65 and over.
- Lucas County Latino adults have had the following vaccines:
  - Measles, mumps, and rubella (MMR) in their lifetime (77%)
  - Chicken pox vaccine in their lifetime (68%)
  - Tetanus booster (Td/Tdap) in the past ten years (64%)
  - Hepatitis B vaccine in their lifetime (53%)
  - Hepatitis A vaccine in their lifetime (51%)
  - Influenza type B vaccine in their lifetime (49%)
  - Meningococcal vaccine in their lifetime (26%)
  - Human papillomavirus (HPV) vaccine in their lifetime (22%)
  - Zoster (shingles) vaccine in their lifetime (16%)

Preventive Health Screenings and Exams

- In the past year, 69% of Lucas County Latina women ages 40 and older had a mammogram.
- In the past year, 19% of Latino men ages 50 and older had a digital rectal exam.
- See the Women's and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Lucas County Latino adults.

Lucas County Latino Adult Health Screening Results

General Screening Results	Total Sample*
Diagnosed with High Blood Pressure	32%
Diagnosed with High Blood Cholesterol	21%
Diagnosed with Diabetes	13%
Survived a Heart Attack	6%
Survived a Stroke	5%

**Percentages based on all Lucas County Latino adults surveyed.*

Health Care Topics Discussed by Lucas County Latino Adults With Their Health Care Professional in the Past Year

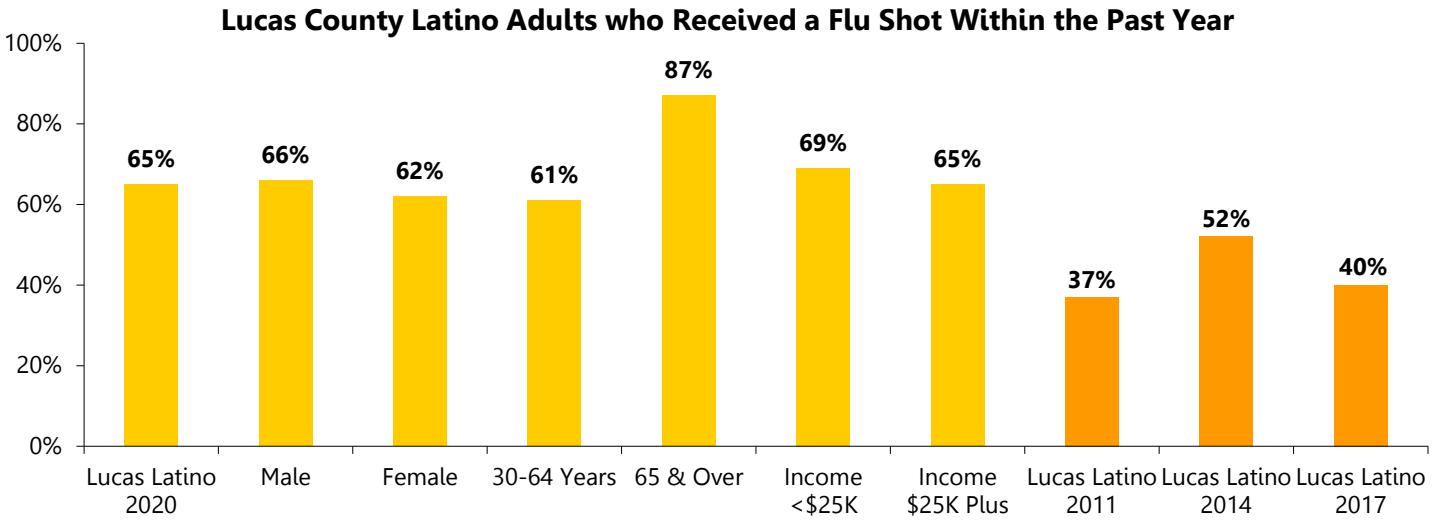
Health Care Topics	Total 2017	Total 2020
Alcohol use	14%	14%
Child care	N/A	1%
Depression, anxiety, or emotional problems	23%	34%
Domestic violence	9%	7%
Drug abuse	7%	10%
E-cigarettes/vaping	N/A	9%
Education	N/A	10%
Family history	N/A	34%
Family planning	5%	5%
Financial strains	N/A	5%
Food access	N/A	9%
Housing	N/A	6%
Immunizations	21%	32%
Injury prevention (e.g., safety belt use, helmet use & smoke detectors)	10%	7%
Safe use of opiate-based pain medication (e.g., Percocet, Vicodin)	10%	4%
Safe use of prescription medication	16%	13%
Sexually transmitted diseases (STDs)	10%	10%
Social connections	N/A	7%
Tobacco use	9%	11%
Training and employment	N/A	8%
Transportation	N/A	1%
Utilities	N/A	1%
Weight control (e.g., diet, physical activity)	31%	37%

N/A – Not Available

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Ever had a pneumonia vaccine in lifetime (ages 65 and older)	53%	52%	67%	70%	70%	N/A	56%
Had a flu vaccine in the past year	31%	37%	52%	40%	65%	33%	25%
Had a flu vaccine in the past year (ages 65 and older)	75%	64%	82%	84%	87%	N/A	50%
Ever had a shingles or zoster vaccine	N/A	N/A	7%	7%	16%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Lucas County Latino adults who received a flu vaccine within the past year. Examples of how to interpret the information shown on the graph include: 65% of Lucas County Latino adults received a flu vaccine within the past year, including 66% of Latino males and 69% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Healthy People 2020*
Immunization and Infectious Diseases (IID)

Objective	Lucas County Latinos 2020	Healthy People 2020 Target
IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	70%	90%
IID-12.7: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated annually against seasonal influenza	87%	90%
IID-14: Increase the percentage of adults who are vaccinated against zoster (shingles)	16%	30%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
**Healthy People 2020 Target is not race specific.*
(Sources: Healthy People 2020 Objectives, 2018 BRFSS, 2020 Lucas County Health Assessment)

Health Care Access: Latina Women's Health

Key Findings

In 2020, 69% of Lucas County Latina women ages 40 and older reported having a mammogram. In the past year, 60% of Lucas County Latina women had a clinical breast exam, and 54% had a Pap smear to detect cancer of the cervix. More than half (56%) were obese, 27% had high blood pressure,18% had high blood cholesterol, and 14% were identified as current smokers, which are all known risk factors for cardiovascular diseases.

Lucas County Latina Female Leading Causes of Death, 2016 – 2018
Total Lucas County Latina Female Deaths: 139

1. Cancers (20% of all deaths)
2. Heart Diseases (19%)
3. Accidents, Unintentional Injuries (12%)
4. Diabetes (6%)
5. Stroke (6%)

(Source: Ohio Public Warehouse, 2016-2018)

Ohio Latina Female Leading Causes of Death, 2016 – 2018
Total Ohio Latina Female Deaths: 1,445

1. Cancers (20% of all deaths)
2. Heart Diseases (17%)
3. Accidents, Unintentional Injuries (10%)
4. Stroke (5%)
5. Alzheimer's disease (4%)

(Source: Ohio Public Warehouse, 2016-2018)

Women's Health Screenings

- Seventy-three percent (73%) of Lucas County Latina women had a mammogram at some time in their life, and more than half (53%) had this screening in the past year.
- Sixty-nine percent (69%) of Lucas County Latina women ages 40 and older had a mammogram in the past year, and 94% had one in the past two years.
- All (100%) Lucas County Latina women had a clinical breast exam at some time in their life, and 60% had one within the past year. Eighty-seven percent (87%) of Latina women ages 40 and older had a clinical breast exam in the past two years.
- One hundred percent (100%) of Lucas County Latina women had a Pap smear at some time in their life, and 54% reported having had the exam in the past year. Eighty-seven percent (87%) of Latina women had a Pap smear in the past three years.

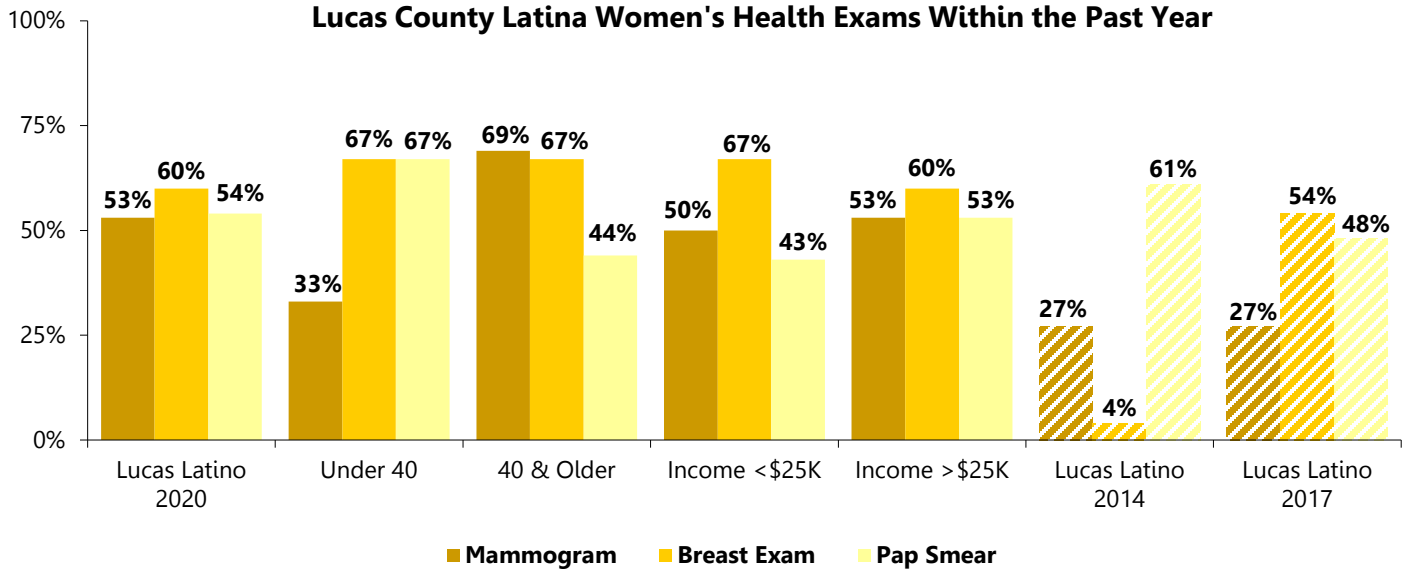
Pregnancy

- One-third (33%) of Lucas County Latina women had been pregnant in the past five years.
- Thinking back to their last pregnancy, 50% of Lucas County Latina women wanted to be pregnant then, 28% of Latina women did not recall,11% wanted to be pregnant sooner, and 11% did not want to be pregnant then or any time in the future.

Women's Health Concerns

- Lucas County Latina women used the following as their usual source of services for female health concerns: private gynecologist (65%), general or family physician (17%), family planning clinic (6%), and community health center (2%). Four percent (4%) of Latina women indicated they did not have a usual source of services for female health concerns.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In 2020, the community health assessment identified that:
  - 74% of Lucas County Latina women were overweight or obese
  - 27% of Lucas County Latina women were diagnosed with high blood pressure
  - 18% of Lucas County Latina women were diagnosed with high blood cholesterol
  - 14% of Lucas County Latina women all Latina women were current smokers
  - 13% of Lucas County Latina women had been diagnosed with diabetes

The following graph shows the percentage of Lucas County Latina female adults that had various health exams in the past year. Examples of how to interpret the information include: 53% of Lucas County Latina females had a mammogram within the past year, 60% had a clinical breast exam, and 54% had a Pap smear.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Had a Pap smear in the past three years (ages 21-65)	N/A	N/A	61%*	69%*	89%	61%	80%
Had a mammogram in the past two years (age 40 & over)	67%	74%	80%	64%	94%	72%	72%
Had a clinical breast exam in the past two years (age 40 and over)	77%	64%	70%	69%	87%	N/A	N/A

N/A – Not Available
**Includes all women regardless of age.*

Cancer and Hispanic Women

Hispanic American men and women generally have lower cancer rates than the non-Hispanic white population. However, disparities still exist in certain types of cancer.

- Hispanic women are 40% more likely to be diagnosed with cervical cancer, and 20% more likely to die from cervical cancer, as compared to non-Hispanic white women.
- Hispanic women are 2.2 times more likely to be diagnosed with stomach cancer, and 2.4 times more likely to die from stomach cancer, as compared to non-Hispanic white women.
- Hispanic women are 30% less likely to be diagnosed with breast cancer than non-Hispanic white women.

(Source: U.S. Department of Health and Human Services Office of Minority Health., Cancer and Hispanic Americans, Updated February 28, 2020)

Health Care Access: Latino Men's Health

Key Findings

Forty-two percent (42%) of Lucas County Latino men had a digital rectal exam in their lifetime, and 5% had one in the past year. More than one-third (35%) of Latino men had been diagnosed with high blood pressure, 23% had high blood cholesterol, and 15% were identified as smokers, which, along with obesity (48%), which are all known risk factors for cardiovascular diseases.

Men's Health Screenings

- Forty-two percent (42%) of Lucas County Latino men had a digital rectal exam in their lifetime, and 5% had one in the past year.

Men's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In 2020, the health assessment identified that:
  - 86% of Lucas County Latino men were overweight or obese
  - 35% of Lucas County Latino men were diagnosed with high blood pressure
  - 23% of Lucas County Latino men were diagnosed with high blood cholesterol
  - 15% of Lucas County Latino men had been diagnosed with diabetes
  - 15% of Lucas County Latino men were current smokers

Lucas County Latino Male Leading Causes of Death, 2016 – 2018
Total Lucas County Latino Male Deaths: 189

1. Heart Diseases (23% of all deaths)
2. Cancers (14%)
3. Accidents, Unintentional Injuries (14%)
4. Chronic Liver Disease and Cirrhosis (6%)
5. Stroke (5%)

(Source: Ohio Public Warehouse, 2016-2018)

Ohio Latino Male Leading Causes of Death, 2016 – 2018
Total Ohio Latino Male Deaths: 1,973

1. Heart Diseases (18% of all deaths)
2. Accidents, Unintentional Injuries (17%)
3. Cancers (16%)
4. Stroke (4%)
5. Diabetes (4%)

(Source: Ohio Public Warehouse, 2016-2018)

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Had a digital rectal exam within the past year	21%	17%	15%	14%	5%	N/A	N/A

N/A – Not Available

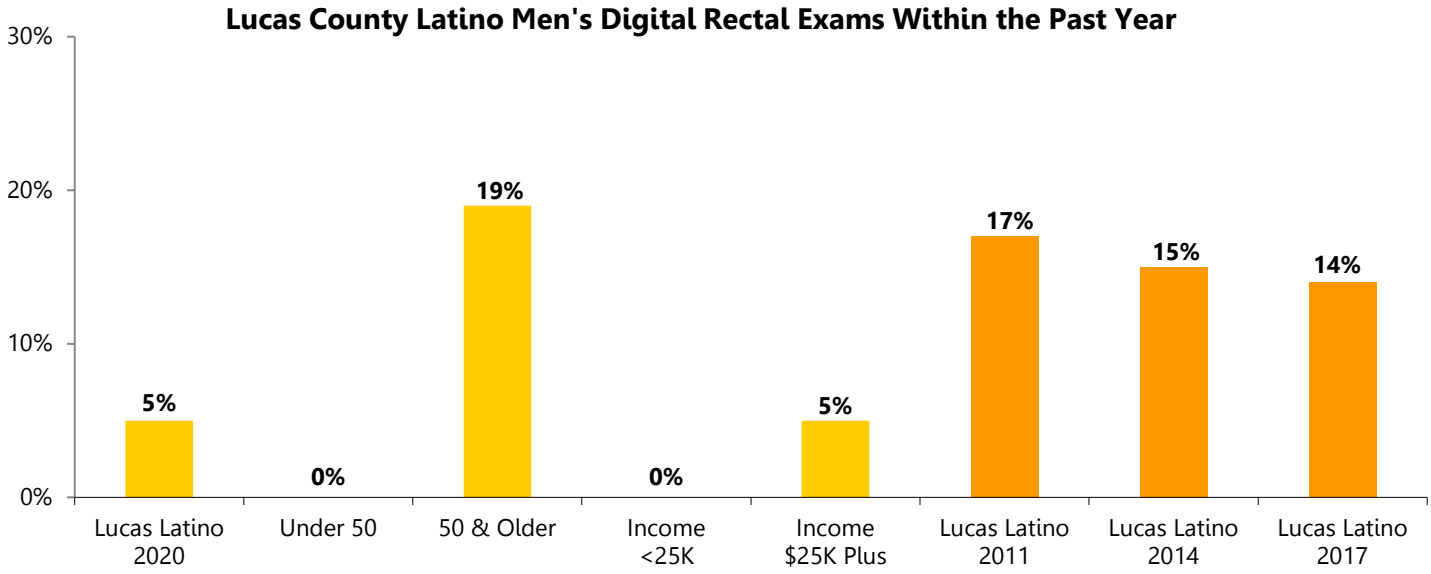
Chronic Liver Disease and Hispanic Americans

Among the Hispanic/Latino population, chronic liver disease is a leading cause of death. While the cause is not always known, some cases can be initiated by conditions such as chronic alcoholism, obesity, and exposure to hepatitis B and C viruses.

- In 2018, chronic liver disease was the seventh leading cause of death for all Hispanics, and the fourth leading cause of death for Hispanic men, ages 55-64.
- Both Hispanic men and women have a chronic liver disease rate that is twice that of the non-Hispanic white population.
- Hispanic men and women are 1.6 and 1.8 times more likely to die respectively from liver and IBD (inflammatory bowel disease) cancer than their non-Hispanic white counterparts.

(Source: U.S. Department of Health and Human Services Office of Minority Health., Updated, March 13, 2020)

The following graphs show the percentage of Lucas County Latino males that had digital rectal exams in the past year. Examples of how to interpret the information include: 5% of Lucas County Latino males had a digital rectal exam within the past year, including 19% of those ages 50 and older and 5% of those with annual incomes more than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Care Access: Oral Health

Key Findings

Fifty-eight percent (58%) of Lucas County Latino adults visited a dentist or dental clinic in the past year. Seventeen percent (17%) of Latino adults did not see a dentist in the past year due to cost.

During the past year, 58% of Lucas County Latino adults visited a dentist or dental clinic.

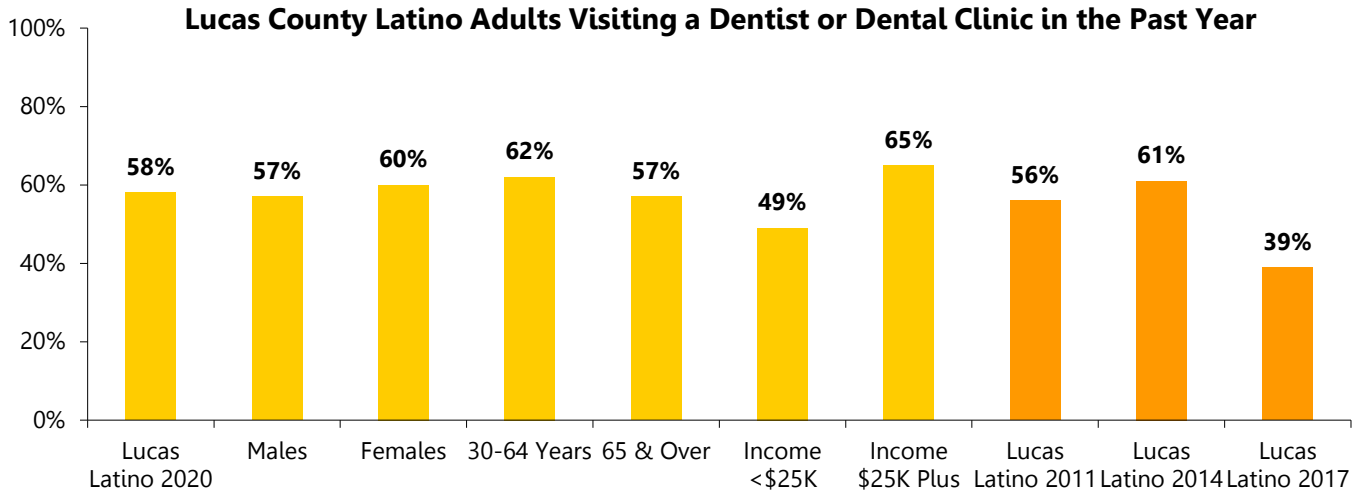
Oral Health

- In the past year, 58% of Lucas County Latino adults had visited a dentist or dental clinic, decreasing to 49% of those with annual incomes less than $25,000.
- More than half (59%) of Lucas County Latino adults with dental insurance had been to the dentist in the past year, compared to 42% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the last year, 33% had no reason to go/had not thought of it; 17% said cost; 17% said fear, apprehension, nervousness, pain, and dislike going; 6% had dentures; 6% did not have/know a dentist; 6% could not get into a dentist; 4% said transportation; and 10% said other reasons. Two percent (2%) of Latino adults selected multiple reasons for not visiting a dentist in the past year.
- Lucas County Latino adults completed the following oral health habits daily: brushed their teeth (94%), used mouth wash (70%), and flossed their teeth (47%).
- Lucas County Latino adults had the following oral health issues: loose teeth (4%), no teeth (4%), skipped meals due to pain (4%), difficulty eating/chewing (3%), oral bleeding (3%), problems with dentures (2%), and missed work due to mouth pain (2%).

Latino Adult Oral Health	Within the Past Year	Within the Past Two Years	Within the Past Five Years	Five or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	57%	7%	14%	20%	0%
Females	60%	17%	19%	2%	0%
Total	58%	11%	16%	13%	0%

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Visited a dentist in the past year	68%	56%	61%	39%	58%	65%	59%

The following graph provides information about the frequency of Lucas County Latino adult dental visits. Examples of how to interpret the information include: 58% of Lucas County Latino adults had been to the dentist or dental clinic in the past year, including 60% of Latina females and 49% of those with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: Latino Health Status Perceptions

Key Findings

In 2020, 45% of Lucas County Latino adults rated their health status as excellent or very good. Conversely, 15% of Latino adults described their health as fair or poor, increasing to 27% of those with annual incomes less than $25,000.

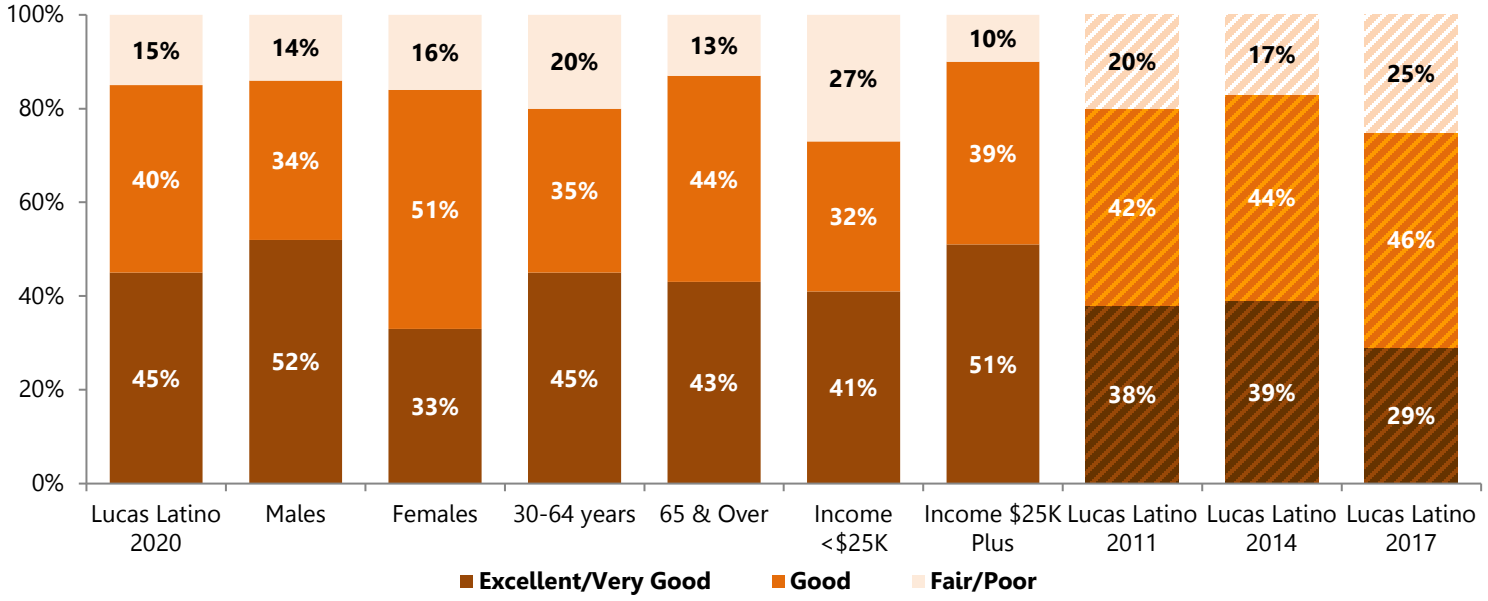
15% of Lucas County Latino adults rated their general health as fair or poor.

General Health Status

- Nearly half (45%) of Lucas County Latino adults rated their health as excellent or very good. Lucas County adults with higher incomes (51%) were most likely to rate their health as excellent or very good, compared to 41% of those with annual incomes less than $25,000.
- Fifteen percent (15%) of Lucas County Latino adults rated their health as fair or poor.
- Lucas County Latino adults were most likely to rate their health as fair or poor if they:
  - Had been diagnosed with diabetes (41%)
  - Had an annual household income under $25,000 (27%)
  - Had high blood pressure (24%) or high blood cholesterol (19%)

The following graph shows the percentage of Lucas County Latino adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 45% of Lucas County Latino adults, 52% of males, and 43% of those ages 65 and older rated their health as excellent or very good.

Lucas County Latino Adult Health Perceptions*



Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Physical Health Status

- More than one-fifth (23%) of Lucas County Latino adults rated their physical health as not good on four or more days in the previous month.
- Lucas County Latino adults reported their physical health as not good on an average of 3.5 days in the previous month.
- Lucas County Latino adults were most likely to rate their physical health as not good (on four or more days during the past month) if they:
  - Had an annual household income under $25,000 (43%)
  - Were 65 years of age or older (26%)
  - Were female (22%)

Mental Health Status

- One-third (33%) of Lucas County Latino adults rated their mental health as not good on four or more days in the previous month.
- Lucas County Latino adults reported their mental health as not good on an average of 4.9 days in the previous month.
- Twenty-seven percent (27%) of Lucas County Latino adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Lucas County Latino adults were most likely to rate their mental health as not good (on four or more days during the past month) if they:
  - Were female (49%)
  - Had an annual household income under $25,000 (39%)
  - Were ages 30-64 (36%)

The table shows the percentage of Latino adults with poor physical and mental health in the past 30 days.

Latino Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past Month*					
Males	45%	22%	8%	7%	8%
Females	39%	24%	4%	0%	19%
Total	42%	23%	6%	4%	13%
Mental Health Not Good in Past Month*					
Males	51%	18%	13%	7%	4%
Females	35%	12%	10%	0%	39%
Total	45%	16%	11%	4%	18%

**Totals may not equal 100% as some respondents answered, "Don't know."*

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Rated health as excellent or very good	55%	38%	39%	29%	45%	57%	38%
Rated health as fair or poor	15%	20%	17%	25%	15%	12%	26%
Rated their mental health as not good on four or more days in the previous month	23%	33%	38%	34%	33%	N/A	23%
Average number of days that mental health was not good (in the past month)	N/A	N/A	N/A	6.5	4.9	N/A	N/A
Rated physical health as not good on four or more days (in the past month)	19%	32%	20%	34%	23%	8%	23%
Average number of days that physical health not good (in the past month)	N/A	N/A	N/A	7.5	3.5	N/A	N/A
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	N/A	N/A	N/A	41%	27%	33%	23%

N/A – Not Available
**County Health Rankings*

Health Behaviors: Latino Adult Weight Status

Key Findings

Eighty percent (80%) of Lucas County Latino adults were overweight or obese based on body mass index (BMI). Twenty-nine percent (29%) of Lucas County Latino adults did not participate in any physical activity in the past week, including 1% who were unable to exercise.

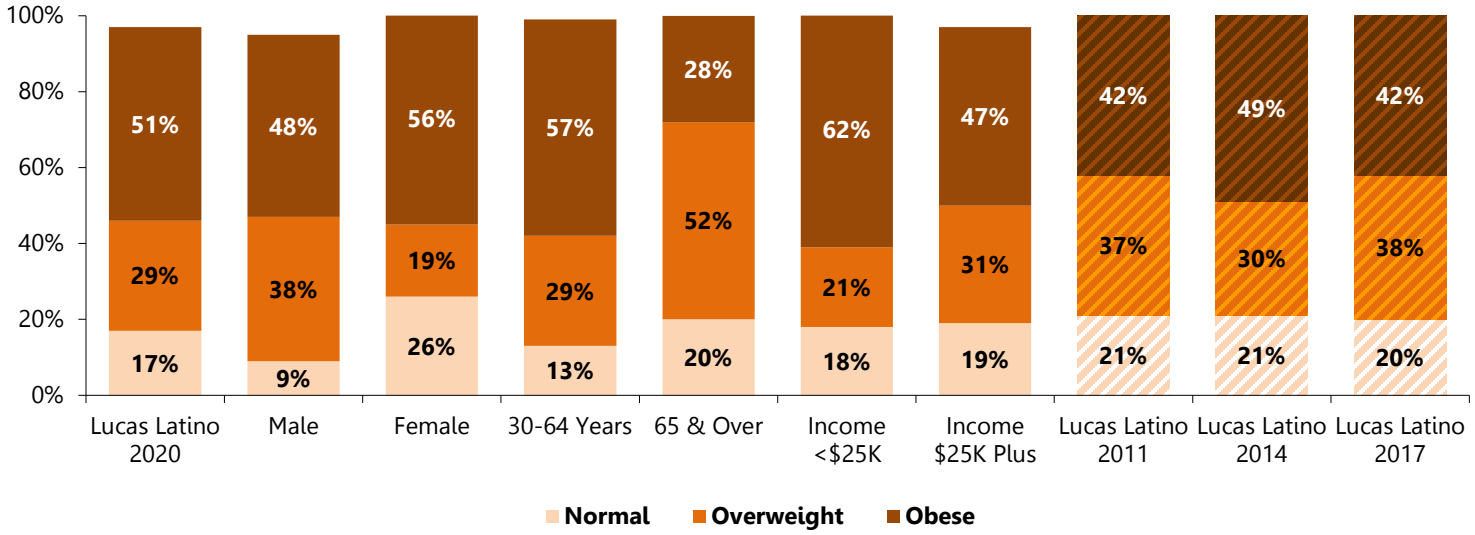
51% of Lucas County Latino adults were obese.

Adult Weight Status

- Eighty percent (80%) of Lucas County Latino adults were either overweight (29%) or obese (51%) by body mass index (BMI), putting them at elevated risk for developing a variety of diseases.
- More than half (55%) of Lucas County Latino adults were trying to lose weight, 23% were trying to maintain their current weight or keep from gaining weight, and 4% were trying to gain weight.
- Lucas County Latino adults did the following to lose weight or keep from gaining weight in the past month: exercised (39%); drank more water (39%); ate less food, fewer calories, or foods low in fat (39%); ate a low-carb diet (19%); smoked cigarettes (3%); used a weight loss program (2%); went without eating 24 or more hours (2%); participated in a prescribed dietary or fitness program (1%); took diet pills, powders or liquids without a doctor's advice (1%); received health coaching (1%); took prescribed medications (1%); other (5%).
- Lucas County Latino adults spent an average of 2.6 hours watching TV, 2.1 hours on their cell phone, 1.5 hours on their PC/tablet, and 0.4 hours playing video games on an average day of the week.

The following graph shows the percentage of Lucas County Latino adults who are overweight or obese by body mass index (BMI). Examples of how to interpret the information include: 17% of all Lucas County Latino adults were classified as normal weight, 29% were overweight, and 51% were obese.

Lucas County Latino Adult BMI Classifications*



*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latino 2020	Ohio Latinos 2018	U.S. Latinos 2018
Overweight (BMI of 25.0 – 29.9)	35%	37%	30%	38%	29%	20%	38%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	33%	42%	49%	42%	51%	38%	34%

Physical Activity

- In Lucas County, 58% of Latino adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. Thirty-seven percent (37%) of adults exercised 5 or more days per week. Twenty-nine percent (29%) of adults did not participate in any physical activity in the past week, including 1% who were unable to exercise.

- Lucas County Latino adults spent the most time doing the following physical activities in the past year: walking (36%), exercise machines (8%), occupational exercise (3%), running/jogging (2%), cycling (2%), group exercise classes (2%), swimming (2%), and other (4%). Twenty-six percent (26%) of adults engaged in multiple types of exercise.

- Lucas County Latino adults reported the following would help them use community parks, bike trails, and walking paths more frequently:
  - More accessible parks, bike trails, and walking paths (35%)
  - Designated safe routes (29%)
  - Improvements to existing parks, trails, and paths (28%)
  - Better promotion and advertising of existing parks, trails, and paths (27%)
  - More public events and programs involving parks, trails, and paths (23%)

- Lucas County Latino adults reported the following reasons for not exercising: time (26%); self-motivation/will power (22%); too tired (21%); weather (19%); laziness (16%); pain or discomfort (12%); could not afford a gym membership (10%); no exercise partner (9%); no child care (6%); afraid of injury (6%); neighborhood safety (6%); choose not to exercise (5%); ill or physically unable (5%); do not like to exercise (4%); no walking, biking trails, or parks (4%); poorly maintained/no sidewalks (4%); too expensive (3%); did not know what activity to do (2%); no transportation to a gym or other exercise opportunity (2%); lack of opportunities for those with physical impairments or challenges (2%), and no gym available (1%).

Nutrition

The table below indicates the number of servings of fruit, vegetables, sugar-sweetened beverages, and caffeinated beverages Lucas County Latino adults consumed daily.

	5 or more servings daily	3-4 servings daily	1-2 Servings daily	0 servings daily
Fruit	0%	9%	78%	13%
Vegetables	1%	17%	75%	7%
Sugar-sweetened beverages	2%	8%	50%	40%
Caffeinated beverages	10%	10%	46%	34%

- In 2019, 44% of Lucas County Latino adults ate 1 to 2 servings of fruits and/or vegetables per day, 34% ate 3 to 4 servings per day, and 16% ate 5 or more servings per day. Six percent (6%) of adults ate no servings of fruits and vegetables per day.

- Lucas County Latino adults reported they obtain their fresh fruits and vegetables from the following:
  - Large grocery store (such as Wal-Mart, Meijer, Kroger) (83%)
  - Farmers market (41%)
  - Local grocery store (such as Save-A-Lot) (25%)
  - Grow their own/garden (10%)
  - Food pantry (6%)
  - Dollar general/store (3%)
  - Veggie mobile/mobile produce (1%)
  - Mail order food services (such as Blue Apron) (1%)
  - Group purchasing, community supported agriculture (CSA) (1%)
  - Other (3%)

- Lucas County Latino adults reported the following barriers to consuming fruits and vegetables: too expensive (15%), they did not like the taste (5%), did not have access to fruits and vegetables (5%), did not know how to prepare (3%), no variety (2%), stores did not take EBT (1%), and other barriers (3%).

- Lucas County Latino adults reported the following reasons they chose the types of food they ate:
  - Taste/enjoyment (47%)
  - Cost (42%)
  - Healthiness of food (39%)
  - Food they were used to (37%)
  - Ease of preparation/time (35%)
  - What their family prefers (28%)
  - Availability (24%)
  - Nutritional content (22%)
  - Calorie content (13%)
  - If it is organic (10%)
  - Artificial sweetener content (8%)
  - If it is genetically modified (5%)
  - Other food sensitivities (5%)
  - Limitations due to dental issues (4%)
  - Availability at food panty (4%)
  - If it is lactose free (4%)
  - Health care provider's advice (2%)
  - If it is gluten free (2%)
  - Limitations set by WIC (2%)
  - Other reasons (6%)

Health Behaviors: Latino Adult Tobacco Use

Key Findings

In 2020, 14% of Lucas County Latino adults were current smokers, and 30% were considered former smokers. One-fourth of (25%) Lucas County Latino adults used cigarettes in the past year. Forty-two percent (42%) of Lucas County Latino current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

14% of Lucas County Latino adults were current smokers.

Adult Tobacco Use Behaviors

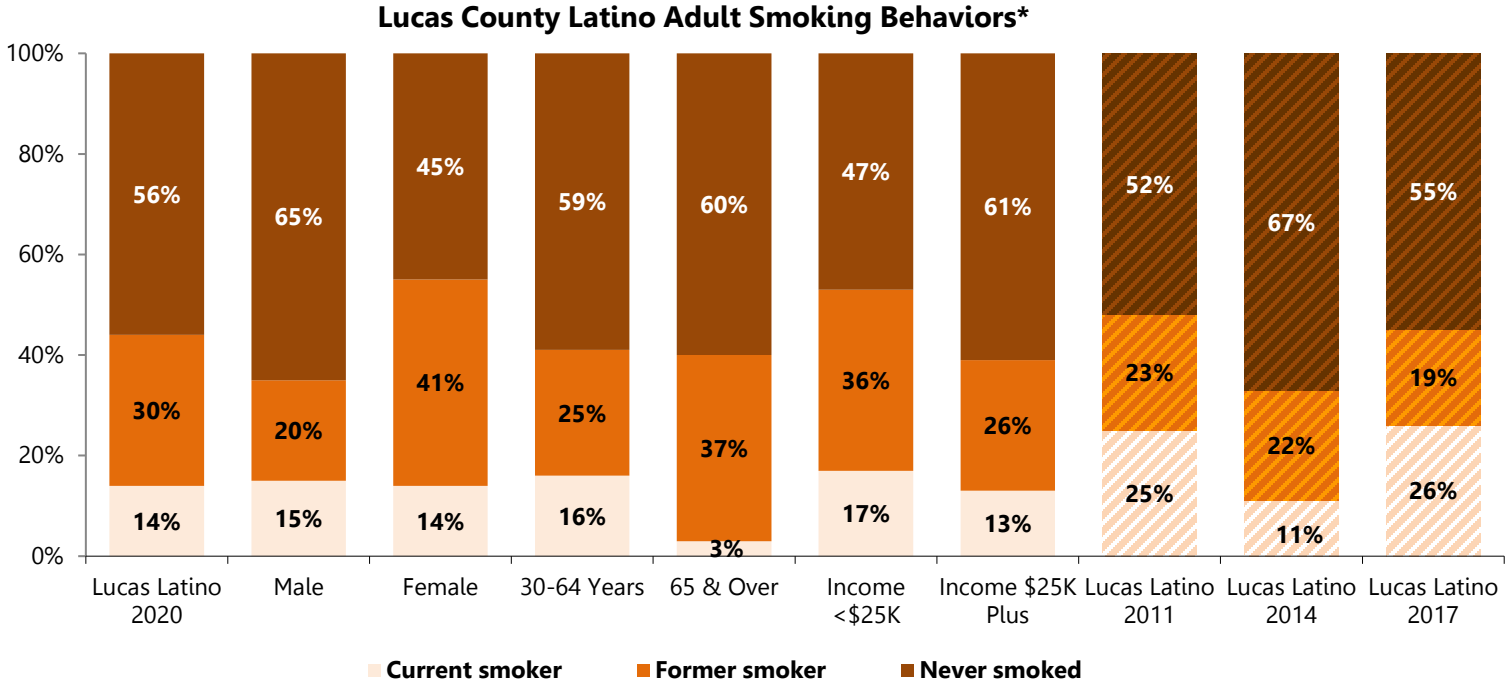
- Fourteen percent (14%) of Lucas County Latino adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Thirty percent (30%) of Lucas County Latino adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Lucas County Latino adult smokers were more likely to have:
  - Been a member of an unmarried couple (55%)
  - Annual incomes less than $25,000 (17%)
  - Been ages 30-64 (16%)
- Lucas County Latino adults used the following tobacco products in the past year: cigarettes (25%); cigars (2%); little cigars (2%); hookah (2%); cigarillos (1%); and chewing tobacco, snuff, or snus (1%).
- Forty-two percent (42%) of Lucas County Latino current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Lucas County Latino adults had the following rules/practices about smoking tobacco in their home: allowed only in certain rooms (3%), not allowed with children around (36%). Lucas County Latino adults had the following rules/practices about smoking tobacco in their car: allowed (5%), never allowed (87%), allowed only when one or more windows are open (4%), and not allowed with children around (5%).
- Lucas County Latino adults had the following rules/practices about using e-cigarettes/vapes in their home: allowed only in certain rooms (2%), not allowed with children around (31%), and allowed anywhere (9%). Lucas County Latino adults had the following rules/practices about using e-cigarettes/vapes in their car: allowed (7%), never allowed (81%), allowed only when one or more windows are open (1%), and not allowed with children around (3%).
- Lucas County Latino adults reported they would support an ordinance to ban smoking in the following places:
  - Vehicle with a minor present (73%)
  - Multi-unit housing (64%)
  - Rental homes (62%)
  - Parks or ball fields (62%)
  - Fairgrounds (60%)
  - College/university campuses (59%)
- Twenty percent (20%) of Lucas County Latino adults reported they would not support an ordinance to ban smoking anywhere.
- Lucas County Latino adults indicated e-cigarette vapor is harmful to the following: themselves (75%), others (71%), children (71%), an unborn child (73%) and not harmful to anyone (3%).

- Fifteen percent (15%) of adults did not know if e-cigarette vapor was harmful to themselves or others.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Current smoker (smoked on some or all days)	26%	25%	11%	26%	14%	29%	12%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	18%	17%	22%	19%	30%	18%	18%
Tried to quit smoking	N/A	N/A	N/A	41%	42%	N/A	N/A
Used chewing tobacco or snuff in the past year	N/A	N/A	N/A	1%	1%	N/A	N/A

N/A – Not Available

The following graph shows Lucas County Latino adults' smoking behaviors. Examples of how to interpret the information include: 14% of all Lucas County Latino adults were current smokers, 30% of all adults were former smokers, and 56% had never smoked.



Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: Adult Alcohol Consumption

Key Findings

More than half (53%) of Lucas County Latino adults had at least one alcoholic drink in the past month. More than one-third (37%) of Lucas County Latino adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.

37% of Lucas County Latino adults were considered binge drinkers.

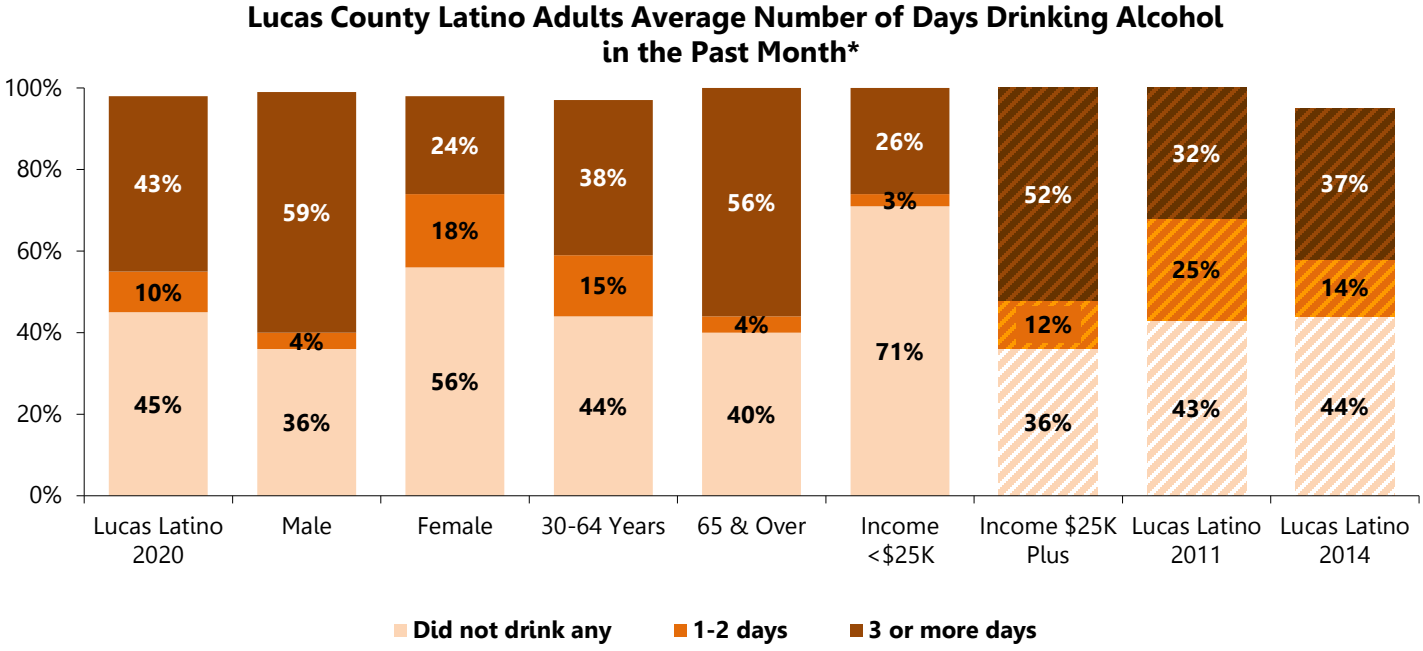
Adult Alcohol Consumption

- More than half (53%) of Lucas County Latino adults had at least one alcoholic drink in the past month, increasing to 64% of those with annual incomes of $25,000 or more.
- Of those who drank, Lucas County Latino adults drank 4.4 drinks on average.
- More than one-third (37%) of Lucas County Latino adults reported they had five or more alcoholic drinks (for males or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers. Of those who drank in the past month, 70% had at least one episode of binge drinking.
- Twelve percent (12%) of Lucas County Latino adults reported driving after having perhaps too much alcohol to drink in the past month, increasing to 17% of those ages 30-64.
- Lucas County Latino adults reported they or a family member experienced the following during the past 6 months:
  - Continued to drink despite problems caused by drinking (9%)
  - Drank more than they expected (7%)
  - Drove a vehicle or other equipment after having any alcoholic beverage (5%)
  - Tried to quit or cut down but couldn't (5%)
  - Drank to ease withdrawal symptoms (5%)
  - Had legal problems (4%)
  - Spent a lot of time drinking (2%)
  - Had to drink more to get same effect (1%)
  - Placed themselves or their family in harm (2%)
  - Failed to fulfill duties at work, home, or school (1%)
  - Gave up other activities to drink (1%)
  - Used prescription drugs while drinking (1%)
- Lucas County Latino adults did not use a program or service to help with an alcohol problem for themselves or a loved one for the following reasons: stigma of seeking alcohol services (5%), have not thought of it (2%), transportation (1%), fear (1%) do not want to get in trouble (1%), and other (5%). Eighty-seven percent (87%) of Lucas County Latino adults indicated that they did not need a program or service to help with an alcohol problem for themselves or a loved one.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Current drinker (had at least one drink of alcohol within the past month)	47%	57%	51%	57%	53%	48%	46%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	N/A	29%	25%	41%	37%	17%	18%
Drove after having perhaps too much alcohol to drink (in the past month)	N/A	N/A	N/A	6%	12%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Lucas County Latino adults consuming alcohol a in the past month. Examples of how to interpret the information include: 45% of all Lucas County Latino adults did not drink alcohol in the past month, including 56% of females and 71% of those with annual incomes less than $25,000.



Percentages may not equal 100% as some respondents answered, "Don't know."
Note for graph: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: Latino Adult Drug Use

Key Findings

Seven percent (7%) of Lucas County Latino adults had used recreational marijuana during the past 6 months. Six percent (6%) of Latino adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

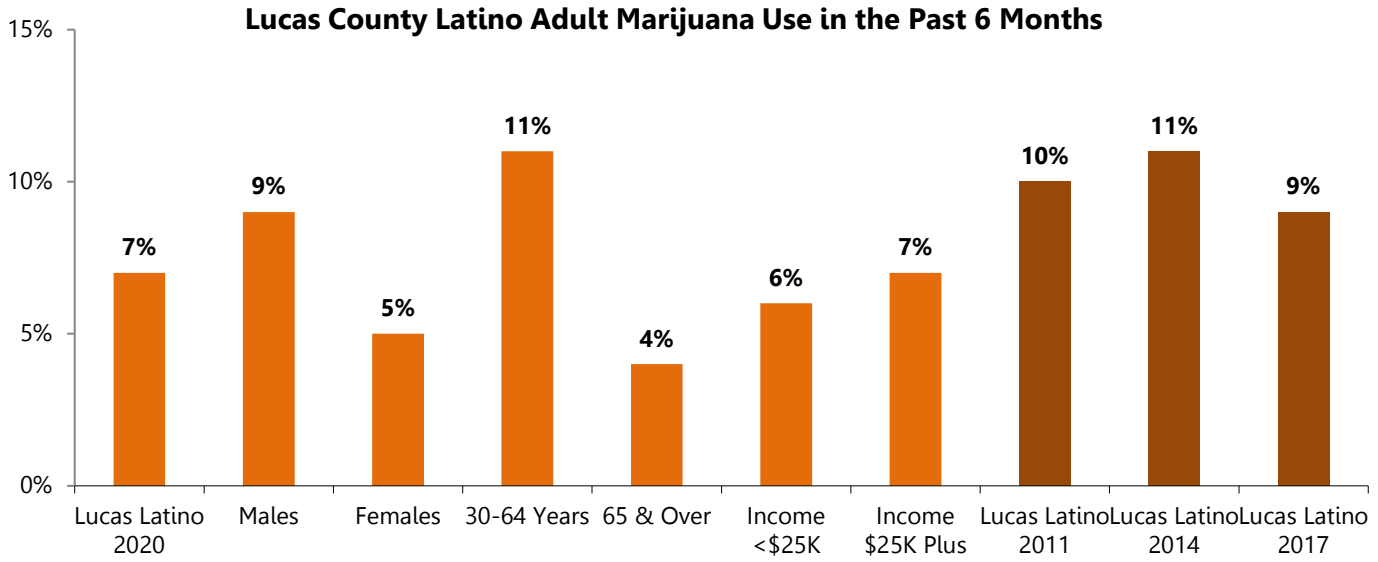
Adult Drug Use

- Lucas County Latino adults reported that they **and/or** an immediate family member/someone in their household used the following in the past 6 months:
  - Recreational marijuana or hashish (14%)
  - Medical marijuana (9%)
  - Amphetamines, methamphetamine or speed (3%)
  - Cocaine, crack, or coca leaves (3%)
  - Inappropriate use of over-the-counter medications (1%)
  - Heroin/fentanyl (1%)
  - Ecstasy, E, or GHB (1%)
  - Inhalants (1%)
  - Synthetic marijuana/k2 (1%)
  - Wax, oil with THC edibles (12%)
  - Bath salts (2%)
  - LSD, mescaline, peyote, psilocybin, DMY, or mushrooms (1%)
- Seven percent (7%) of Lucas County Latino adults reported using recreational marijuana or hashish in the past 6 months.
- Lucas County Latino adults reported that they **and/or** an immediate family member/someone in their household took the following medications not prescribed to them to feel good, high and/or more active or alert during the past 6 months:
  - Tranquilizers such as Valium or Xanax (11%)
  - Tramadol/Ultram (2%)
  - Steroids (3%)
  - OxyContin (6%)
  - Vicodin (7%)
  - Codeine, Demerol, Morphine, Percocet, Dilaudid, or Fentanyl (4%)
  - Suboxone or Methadone (2%)
  - Ritalin, Adderall, Concerta, or other ADHD medication (11%)
  - Neurontin (2%)
- As a result of using drugs, Lucas County Latino adults indicated they or someone in their household experienced the following: had legal problems (2%), failed a drug screen (2%), administered Narcan or nasal Naloxone (1%), regularly failed to fulfill obligations at work or home (1%), placed themselves in dangerous situations (1%), and overdosed and required EMS/hospitalization (1%).
- Three percent (3%) of Lucas County Latino adults reported being prescribed opioid based medication and had trouble stopping.
- Lucas County Latino adults did not use a program or service to help with a drug problem for themselves or a loved one for the following reasons: could not afford to go (4%), insurance did not cover it (3%), a program was not available (3%), had not thought of it (2%), transportation (1%), fear (1%), stigma of seeking drug services (1%), did not want to get in trouble (1%), and other (4%). Ninety percent (90%) of Lucas County Latino adults indicated that they did not need a program or service to help with a drug problem for themselves or a loved one.

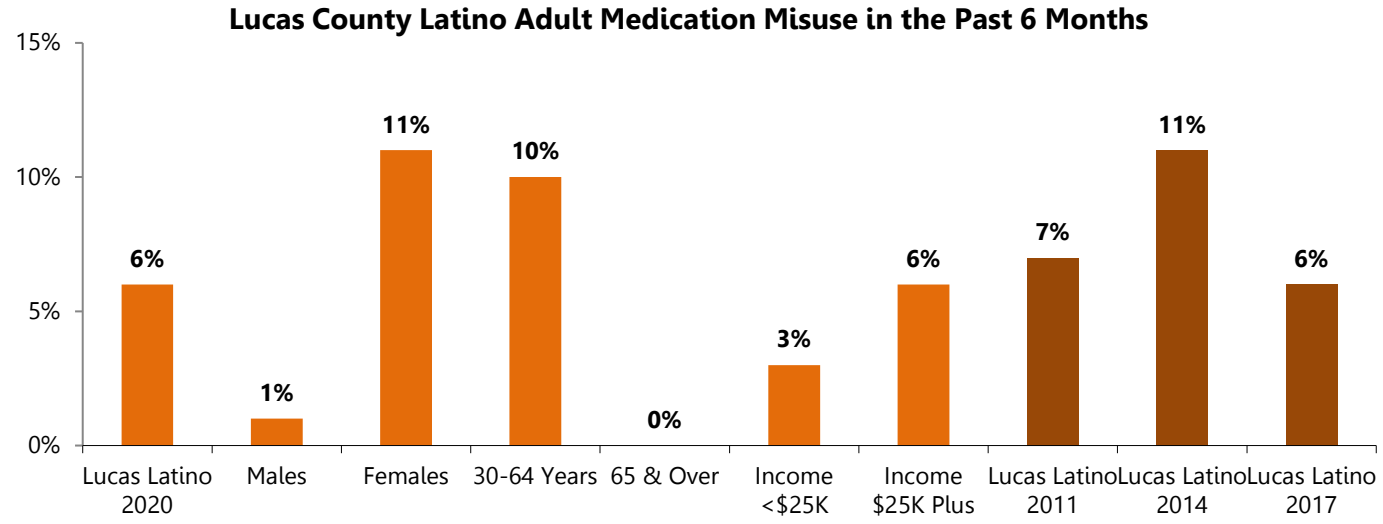
Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas Latinos County 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Adults who used marijuana in the past six months	10%	10%	11%	9%	7%	N/A	N/A
Adults who misused prescription drugs in the past six months	4%	7%	11%	6%	6%	N/A	N/A
Adults who used heroin in the past six months	0%	0%	0%	0%	0%	N/A	N/A

N/A – Not Available

The following graphs indicate adult recreational marijuana use and prescription drug use in the past 6 months. An example of how to interpret the information on the first graph includes: 7% of Lucas County Latino adults used recreational marijuana in the past 6 months, including 9% of males and 6% of those with annual incomes less than $25,000.

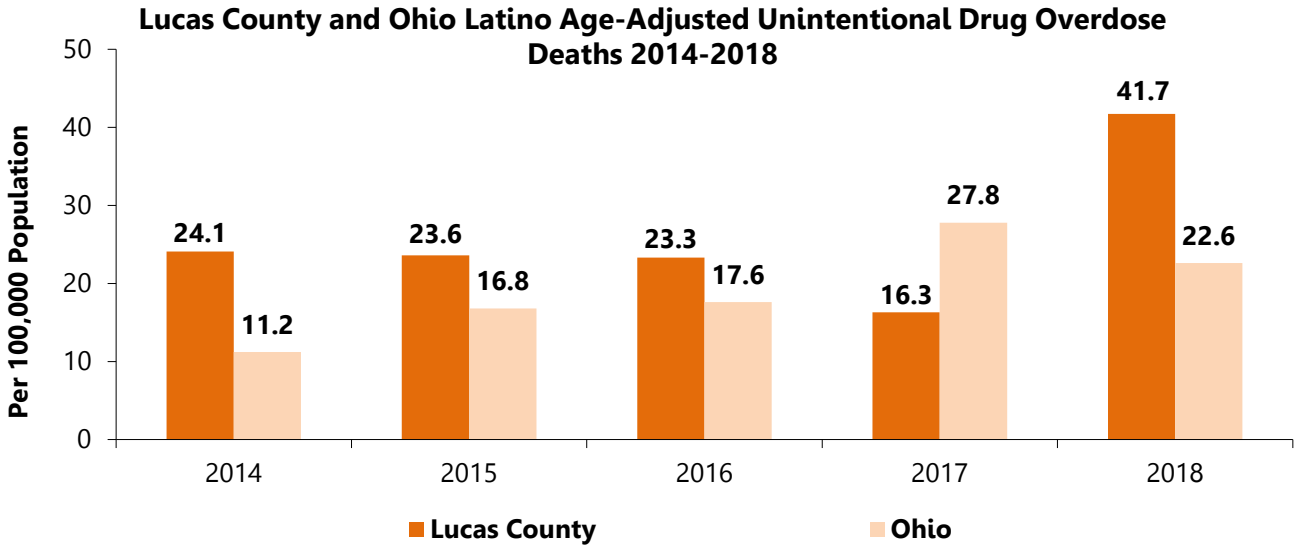


**Does not include wax or oil with THC edibles.*

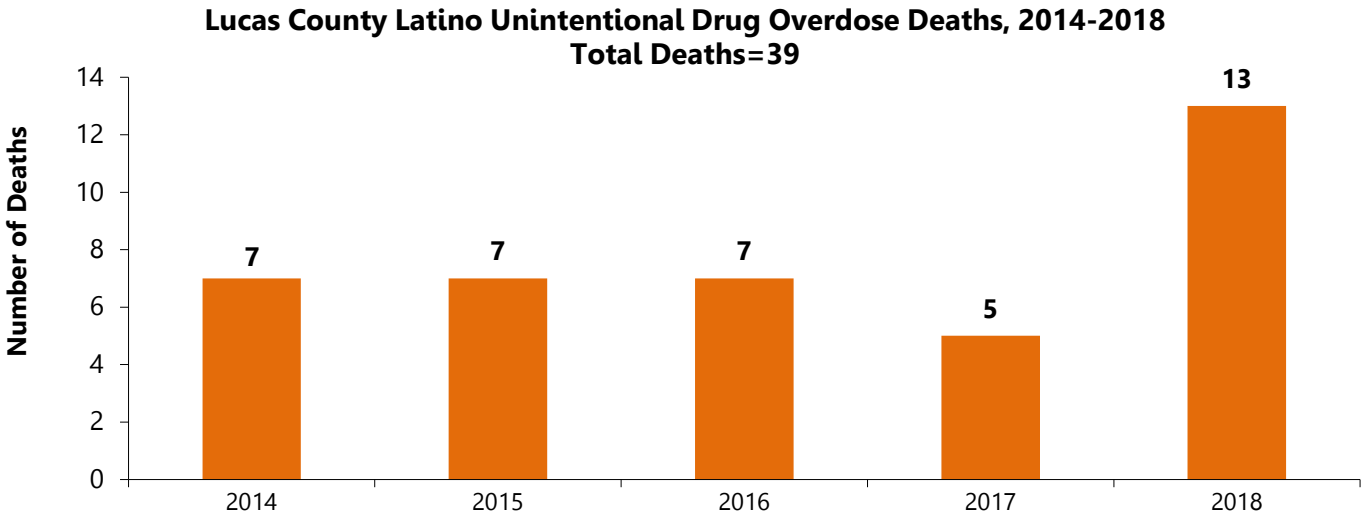


Notes for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the Lucas County and Ohio Latino age-adjusted unintentional drug overdose deaths from 2014 to 2018.



The following graph shows the number of Latino unintentional drug overdose deaths from 2014 to 2018 in Lucas County.



(Source for graphs: Ohio Public Health Data Warehouse, 2014-2018, Updated 12/11/19)
Note Ohio Resident deaths include individuals that resided in Ohio at the time of death regardless of where the death occurred.

Health Behaviors: Latino Adult Sexual Behavior

Key Findings

Seventy-five percent (75%) of Lucas County Latino adults had sexual intercourse in the past year. Ten percent (10%) of Latino adults had more than one partner.

Adult Sexual Behavior

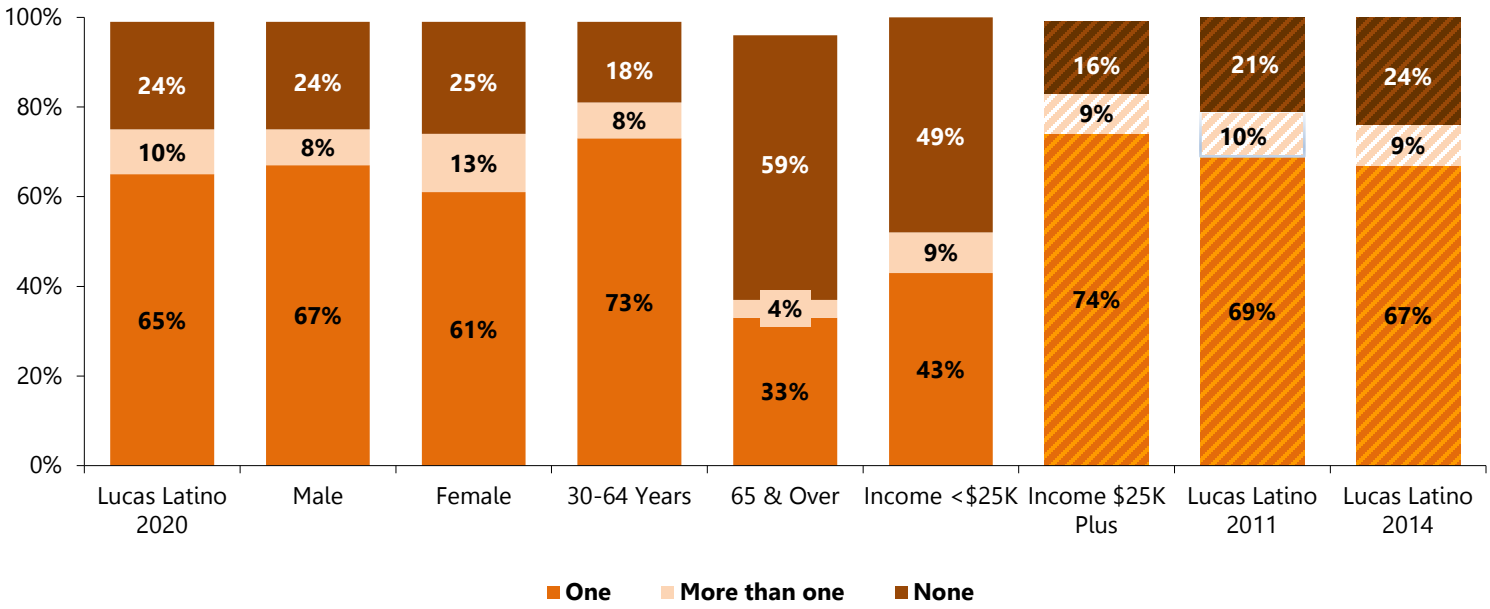
- Seventy-five percent (75%) of Lucas County Latino adults had sexual intercourse in the past year.
- Ten percent (10%) of Lucas County Latino adults reported they had intercourse with more than one partner in the past year, increasing to 13% of females.
- Lucas County Latino adults used the following methods of birth control: female sterilization (tubes tied) (16%); they or their partner was too old to get pregnant (11%); birth control pills, any kind (9%); gay or lesbian (9%); male or female condoms (7%); contraceptive implant (e.g., Nexplanon) (6%); vasectomy (6%); withdrawal (3%); shots (e.g., Depo-Provera) (3%); practicing abstinence (2%); had ovaries or testicles removed (2%); hysterectomy (2%); IUD (1%); foam, jelly, film or cream (1%); and they or their partner is infertile (3%).
- Twelve percent (12%) of Lucas County Latino adults were not using any method of birth control, 2% were pregnant and 2% were trying to get pregnant.
- The following situations applied to Lucas County Latino adults: had sex without a condom in the past year (26%); had anal sex without a condom in the past year (10%); had sexual activity with someone of the same gender (8%); had sex with someone they did not know (6%); treated for an STD in the past year (5%); had tested positive for HPV (5%); engaged in sexual activity following alcohol or other drug use that they would not have done if sober (5%); sex with someone they met on social media (3%); had four or more sexual partners in the past year (3%); tested positive for HIV (2%); used intravenous drugs in the past year (1%); and tested positive for Hepatitis C (1%).
- Eleven percent (11%) of Lucas County Latino adults were forced or coerced to have any type of unwanted sexual activity, increasing to 16% of females and 18% of those with annual incomes less than $50,000. Twenty-nine percent (29%) of those who were forced to have sexual activity reported it.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Had more than one sexual partner in the past year	7%	10%	9%	14%	10%	N/A	N/A

N/A – Not Available

The following graph shows the number of sexual partners Lucas County Latino adults had in the past year. Examples of how to interpret the information include: 65% of all Latino Lucas County adults had one sexual partner in the past year, 10% had more than one partner, and 24% did not have a sexual partner.

Lucas County Latino Number of Sexual Partners in the Past Year*

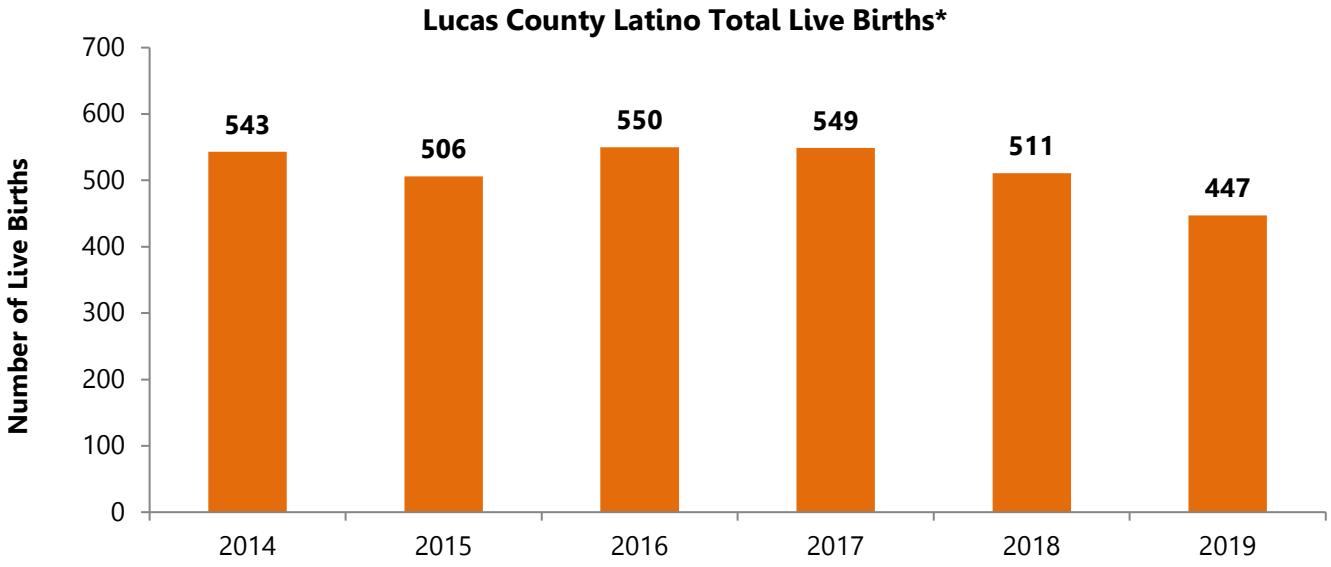


Respondents were asked: "During the past year, with how many different people have you had sexual intercourse?"
**Totals may not equal 100% as some respondents answered, "Don't know".*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey)

Latino Pregnancy Outcomes

Note: Pregnancy outcome data includes all births to both adults and adolescents.

- From 2014 to 2019, there was an average of 518 live births per year in Lucas County.



**Note: Mothers Ethnicity = Latino*
(Source: Ohio Public Health Data Warehouse 2014-2018, Updated 8/16/2020)

Health Behaviors: Latino Adult Mental Health

Key Findings

Four percent (4%) of Lucas County Latino adults considered attempting suicide in the past year. During the past year, 29% of Latino adults had a period of two or more weeks when they felt sad, blue or depressed.

4% of Lucas County Latino adults seriously considered attempting suicide in the past year.

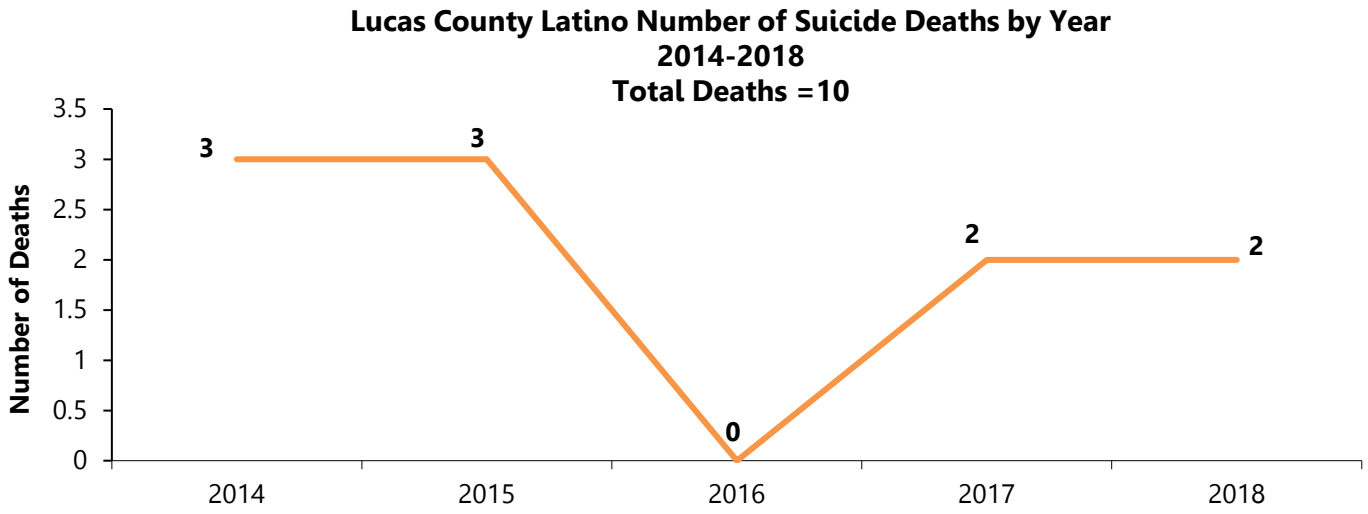
Adult Mental Health

- During the past year, Lucas County Latino adults experienced the following almost every day for two weeks or more in a row: did not get enough sleep or rest (43%); had high stress (36%); felt sad, blue or depressed (29%); felt worried, tense or anxious (27%); stopped during some usual activities (16%); had an unusual increase or loss of appetite (10%); and felt very healthy and full of energy (9%).
- Four percent (4%) of Lucas County Latino adults seriously considered attempting suicide in the past year.
- One percent (1%) of Lucas County Latino adults reported actually attempting suicide in the past year.
- Lucas County Latino adults reported they or someone in their household were diagnosed with or treated for the following mental health issues in the past year: anxiety or emotional problems (32%), anxiety disorder (panic attacks, phobia, obsessive-compulsive disorder) (27%), depression (26%), attention deficit/hyperactivity disorder (ADD/ADHD) (15%), post-traumatic stress disorder (PTSD) (9%), bipolar disorder (8%), psychotic disorder (schizophrenia, schizoaffective disorder) (6%), alcohol and illicit drug abuse (6%), autism spectrum (5%), other trauma (4%), developmental disability (3%), gambling problem (2%), eating disorder (2%), other mental health disorder (4%).
- Seventeen percent (17%) of Lucas County Latino adults indicated they or someone in their household had taken medication for one or more mental health issues.
- Lucas County Latino adults dealt with stress in the following ways: listened to music (43%), talked to someone they trust (39%), prayed/meditated (29%), exercised (33%), ate more or less than normal (27%), slept (26%), drank alcohol (21%), worked (20%), worked on a hobby (10%), took it out on others (8%), smoked tobacco (5%), called a professional (5%), used illegal drugs (3%), used prescription drugs as prescribed (2%), and other ways (15%).
- The following prevented adults from using a program or service for themselves or a loved one in their household to help with depression, anxiety, or emotional problems.: had not thought of it (13%), fear (7%), did not know how to find a program (7%), stigma of seeking mental health services (6%), co-pay/deductible too high (5%), transportation (4%), took too long to get in to see a doctor/health care provider (3%), could not afford to go (3%), could not get to the office or clinic (2%), other priorities (2%), and other reasons (5%). Fifty-three percent (53%) of adults indicated they did not need such a program and 8% indicated a program has been used.

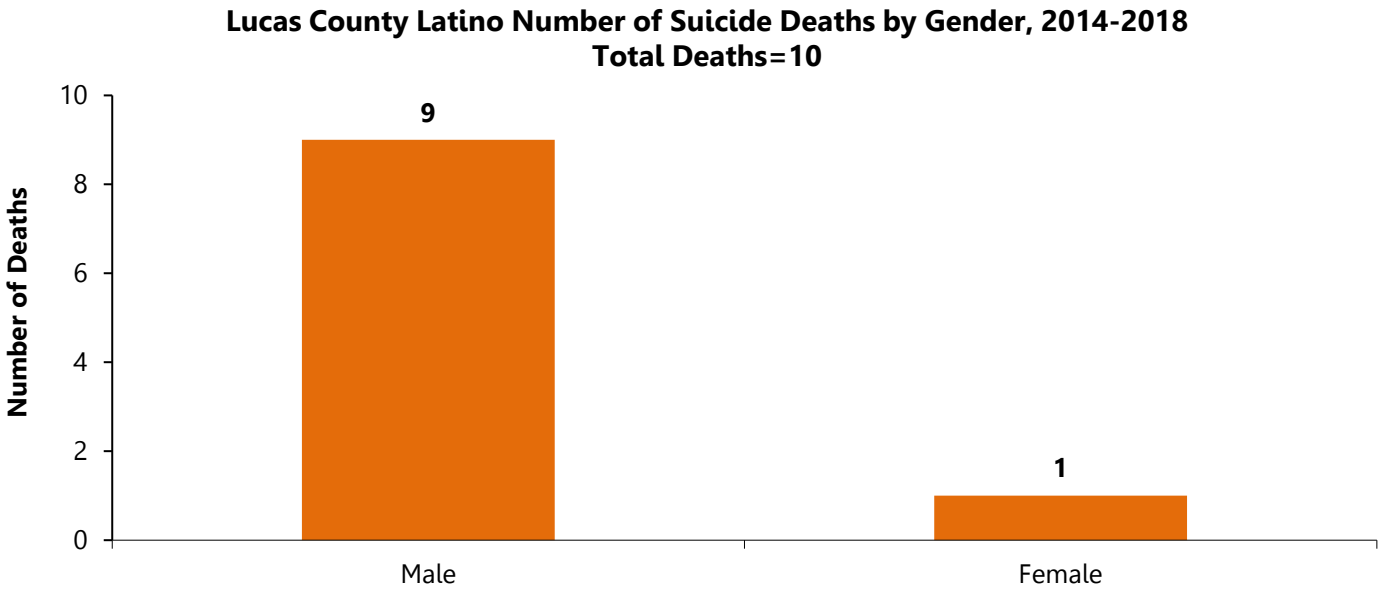
Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Considered attempting suicide in the past year	N/A	7%	8%	7%	4%	N/A	N/A

N/A – Not Available

The graph below shows the number of Latino suicide deaths by year in Lucas County.



The graphs below shows the number of Latino suicide deaths by gender from 2014 to 2018 in Lucas County.



(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/29/2020)

Chronic Disease: Latino Cardiovascular Health

Key Findings

Six percent (6%) of Lucas County Latino adults had survived a heart attack and 5% had survived a stroke at some time in their life. Fifty-one percent (51%) of adults were obese, 32% had high blood pressure, 21% had high blood cholesterol, and 14% were current smokers, which are four known risk factors for heart disease and stroke.

Lucas County Latino
Leading Causes of Death
2016-2018
Total Deaths: 328

1. Heart Disease (21% of all deaths)
2. Cancers (16%)
3. Accidents, Unintentional Injuries (13%)
4. Stroke (5%)
5. Diabetes (4%)

(Source: Ohio Public Warehouse, 2016-2018)

Ohio Latino
Leading Causes of Death
2016-2018
Total Deaths: 3,419

1. Heart Disease (18% of all deaths)
2. Cancers (18%)
3. Accidents, Unintentional Injuries (14%)
4. Stroke (5%)
5. Diabetes (4%)

(Source: Ohio Public Warehouse, 2016-2018)

Heart Disease and Stroke

- Two percent (2%) of Lucas County Latino adults reported they were diagnosed with angina.
- One hundred percent (100%) of those with angina were receiving treatment for the diagnosis.
- Six percent (6%) of Lucas County Latino adults reported they had a heart attack.
- Sixty-three percent (63%) of those who had a heart attack reported currently receiving treatment for the diagnosis.
- Five percent (5%) of Lucas County Latino adults reported they had a stroke.
- Twenty-nine percent (29%) of those who had a stroke reported currently receiving treatment for the diagnosis.
- Five percent (5%) of Lucas County Latino adults reported they had heart disease, increasing to 13% of those over the age of 65.
- Eighty-three percent (83%) of Lucas County Latino adults with heart disease were receiving treatment for it.

6% of Latino adults survived a heart attack or myocardial infarction.

High Blood Pressure (Hypertension)

- Almost one-third (32%) of Lucas County Latino adults had been diagnosed with high blood pressure. Eighty-one percent (81%) of adults reported they were currently receiving treatment for the diagnosis.
- Eighty-eight percent (88%) of Lucas County Latino adults had their blood pressure checked within the past year.
- Lucas County Latino adults diagnosed with high blood pressure were more likely to have:
  - Been classified as overweight or obese by body mass index (BMI) (100%)
  - Been age 65 years or older (60%)
  - Annual incomes less than $25,000 (36%)

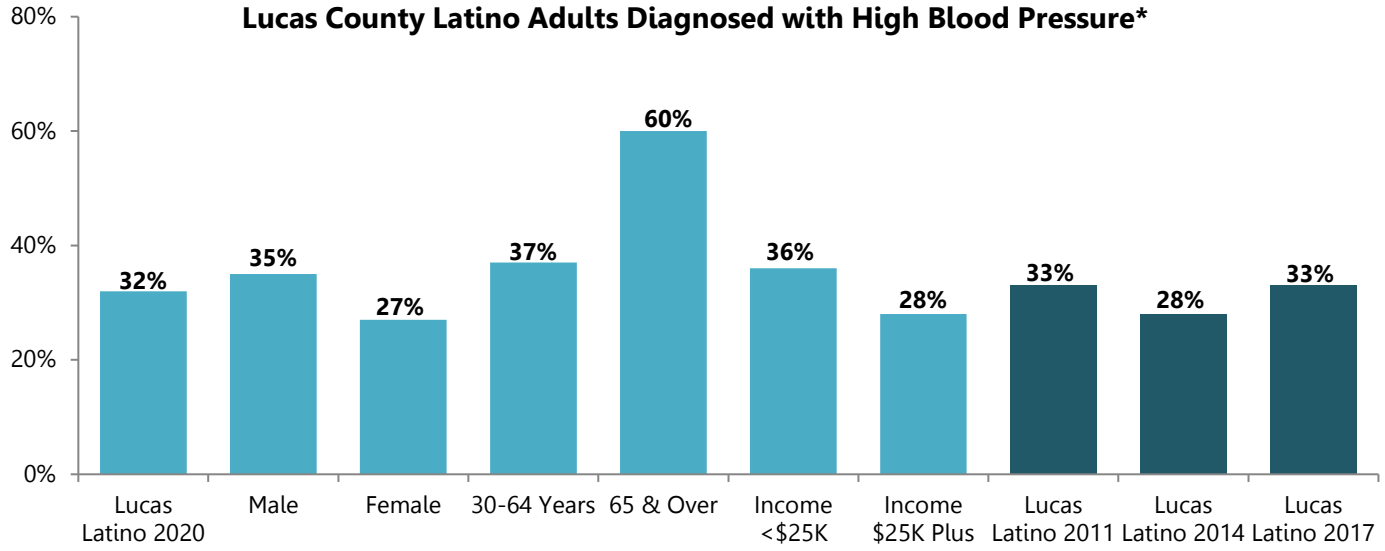
High Blood Cholesterol

- More than two-fifths (21%) of Lucas County Latino adults had been diagnosed with high blood cholesterol. Nearly three-quarters (74%) of adults reported they were currently receiving treatment for the diagnosis.

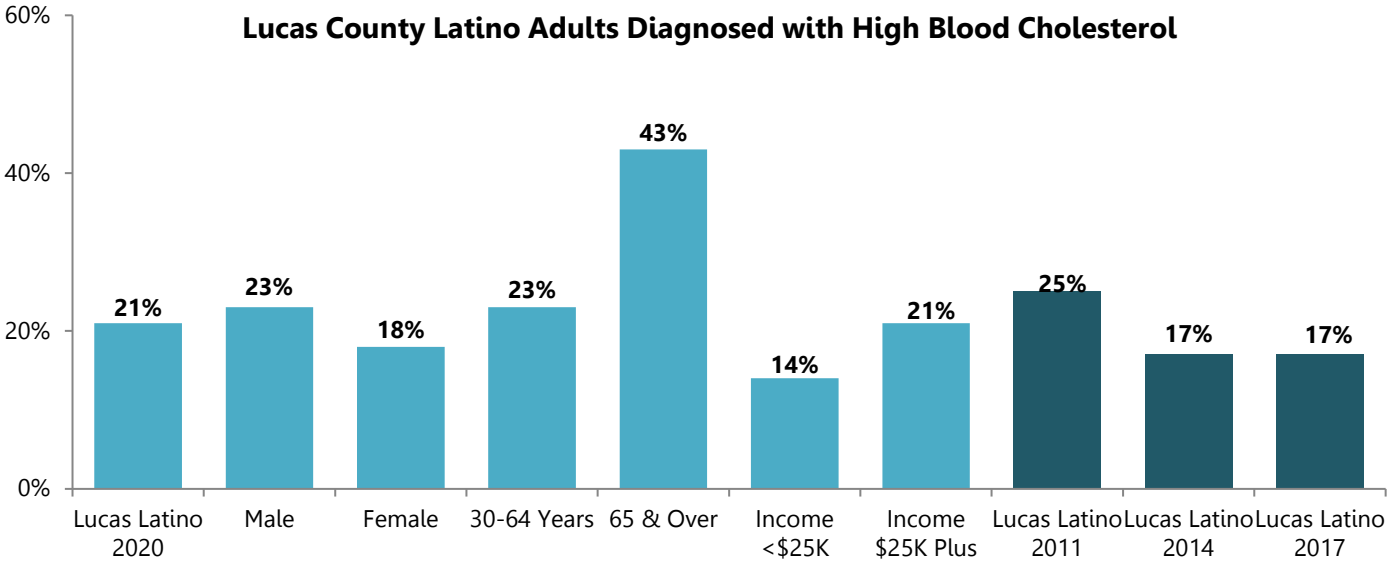
- Eighty-two percent (82%) of Lucas County Latino adults had their blood cholesterol checked within the past five years.

- Lucas County Latino adults with high blood cholesterol were more likely to have:
  - Been classified as overweight or obese by body mass index (BMI) (96%)
  - Been ages 65 years or older (43%)
  - Annual incomes of $25,000 or higher (21%)

The following graphs show the number of Lucas County Latino adults who have been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 32% of all Lucas County Latino adults have been diagnosed with high blood pressure, including 35% of males and 60% of those 65 years and older.

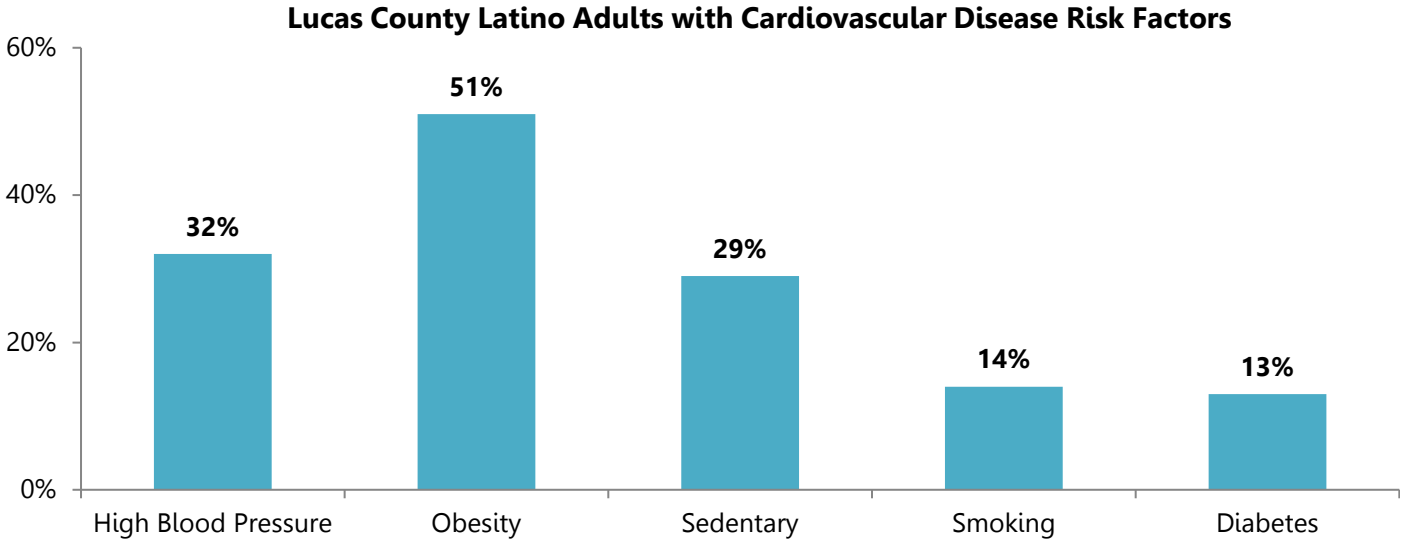


**Does not include respondents who indicated high blood pressure during pregnancy only.*



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph demonstrates the percentage of Lucas County Latino adults who had major risk factors for developing cardiovascular disease (CVD).



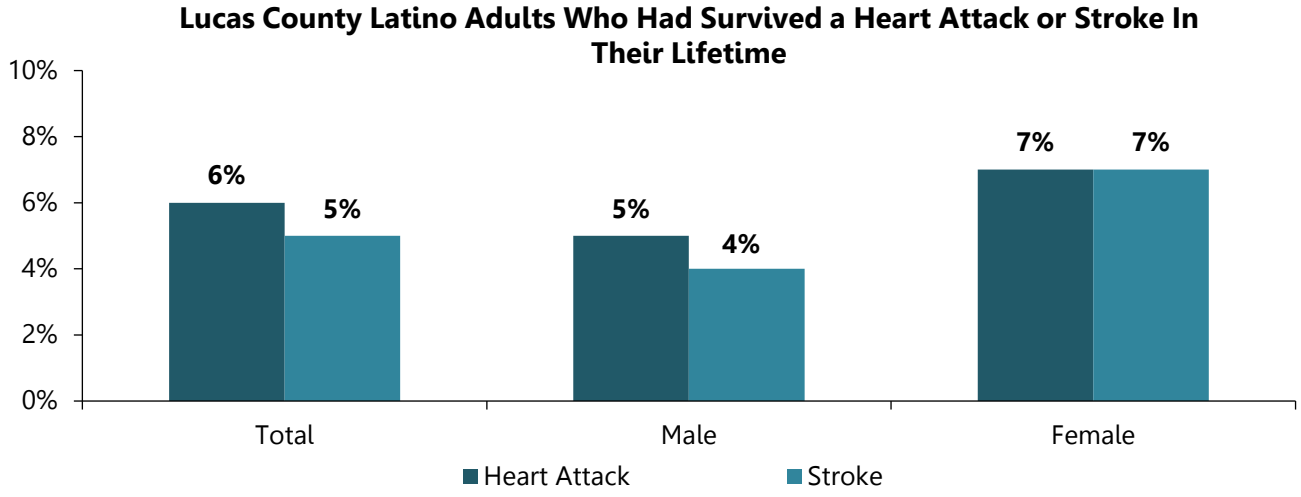
Healthy People 2020 Objectives

Heart Disease and Stroke (HDS)

Objective	2020 Lucas County Latino Survey Population Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	32%	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	82%	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	21%	14%

Note: All U.S. figures age-adjusted to 2000 population standard.
**Healthy People 2020 target is not race specific.*
(Source: Healthy People 2020, 2016 BRFSS, 2019/2020 Lucas County Health Assessment)

The following graph shows the percentage of Lucas County Latino adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 5% of Lucas County Latino males survived a heart attack compared to 7% of females.



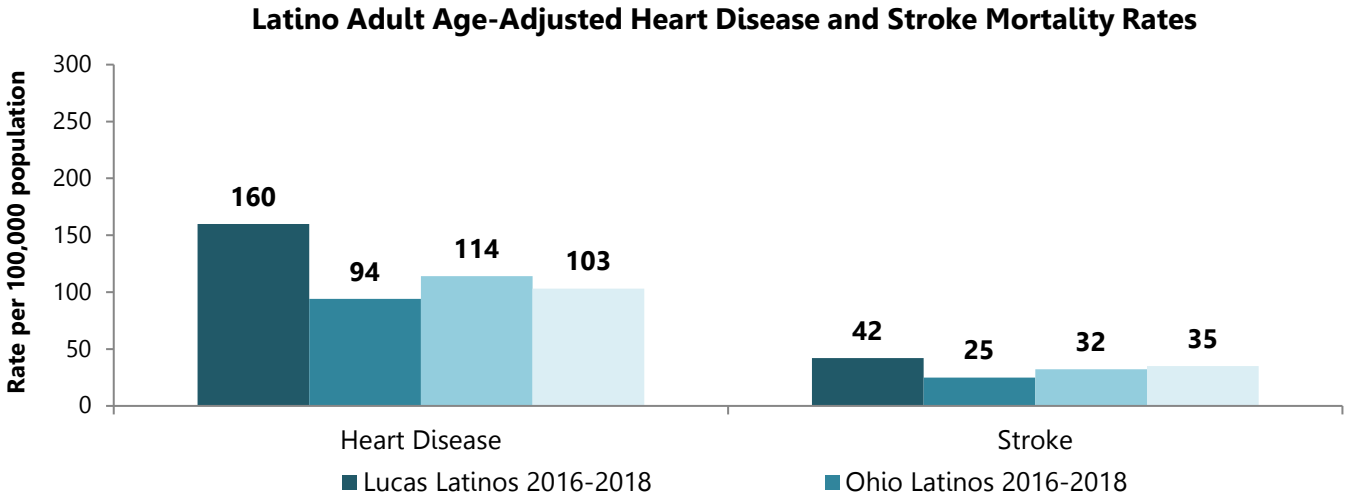
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Had angina	4%	2%	5%	3%	2%	N/A	3%
Had a heart attack	N/A	3%	4%	3%	6%	N/A	4%
Had a stroke	N/A	4%	2%	6%	5%	N/A	2%
Had been diagnosed with high blood pressure	21%	33%	28%	33%	32%	N/A	N/A
Had been diagnosed with high blood cholesterol	29%	25%	17%	17%	21%	N/A	N/A
Had their blood cholesterol checked within the last five years	64%	68%	73%	69%	82%	N/A	N/A

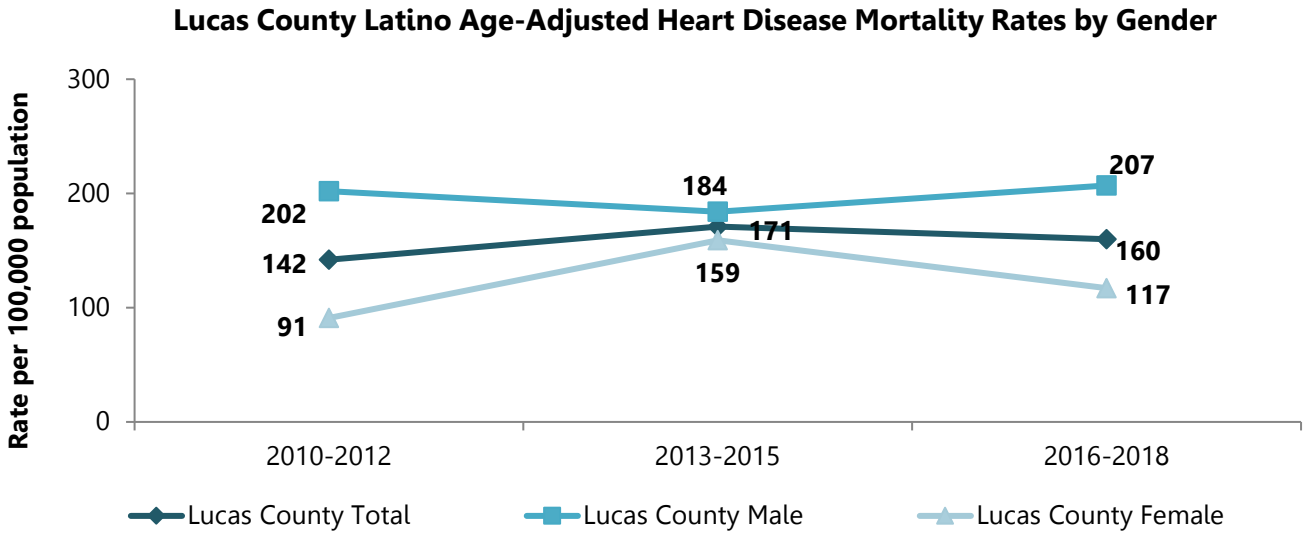
N/A – Not Available

The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- When age differences are accounted for, the statistics indicate that the Lucas County Latino heart disease mortality rate was higher than the figures for the state, the U.S., and Healthy People 2020 target from 2016 to 2018.
- The 2016 to 2018 Lucas County Latino age-adjusted stroke mortality rate was higher than the figures for the state, the U.S., and Healthy People 2020 target.
- From 2010 to 2018, the Lucas County Latina female and male age-adjusted heart disease mortality rates fluctuated.



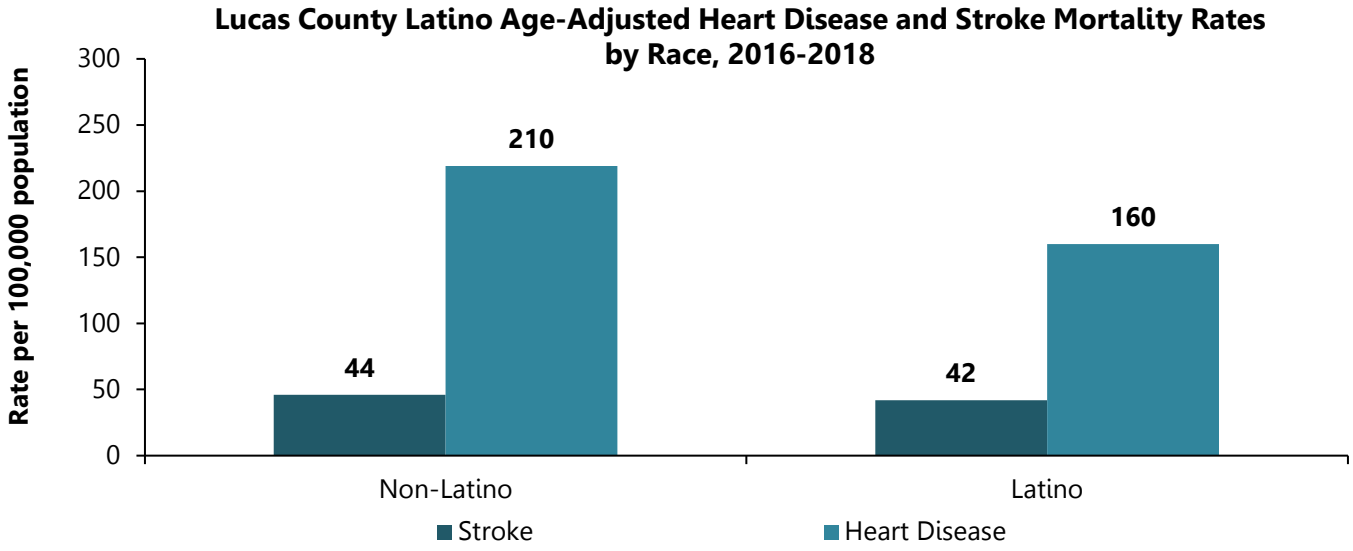
**The Healthy People 2020 Target objective for coronary heart disease is reported for heart attack mortality.*
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2016-2018, Healthy People 2020)



(Source: Ohio Public Health Data Warehouse, 2010-2018)

The following graph shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by the Latino and non-Latino population. The graph shows:

- From 2016 to 2018, the age-adjusted stroke and heart disease mortality rates were higher in the non-Latino population than the Latino population.



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 3/2/20)

Chronic Disease: Latino Cancer

Key Findings

In 2020, 7% of Lucas County Latino adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 16% (54) of all (328) Lucas County Latino resident deaths.

Lucas County Latino Incidence of Cancer, 2013-2017

All Types: 196 cases

- Colon and Rectum: 29 cases (15%)
- Prostate: 25 cases (13%)
- Breast: 17 cases (9%)
- Liver: 17 cases (9%)
- Lung and Bronchus: 11 cases (6%)

From 2016-2018, there were 54 Latino cancer deaths in Lucas County.

(Source: Ohio Cancer Incidence Surveillance System, and ODH Public Health Data Warehouse, Updated 2/7/2019)

Adult Cancer

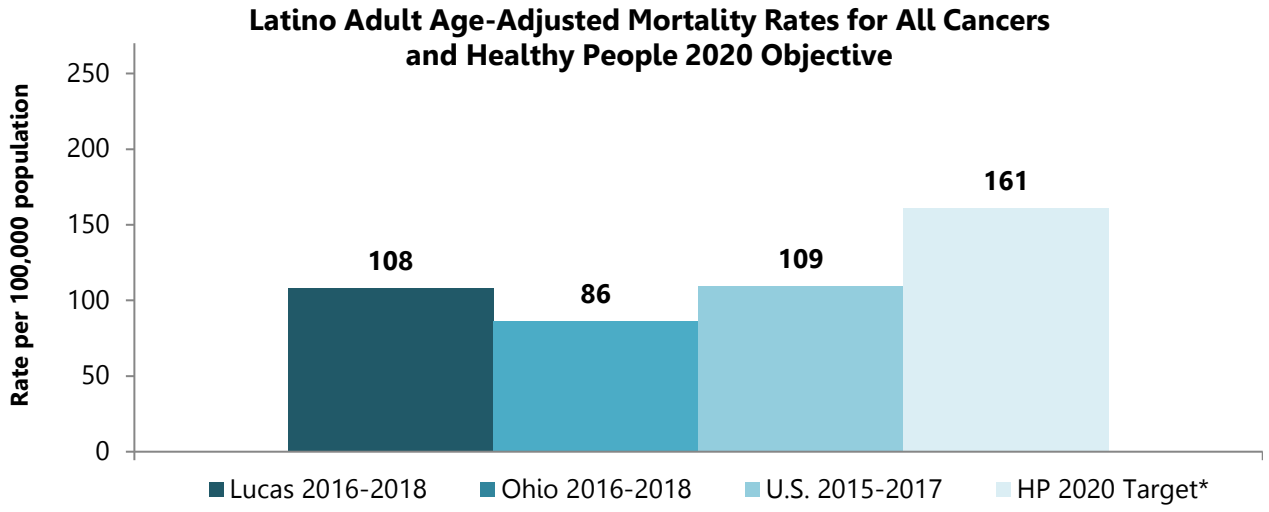
- Seven percent (7%) of Lucas County Latino adults were diagnosed with cancer at some point in their lifetime, increasing to 25% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: prostate (33%), ovarian (33%), testicular (17%), leukemia (13%), head and neck (13%), renal (13%), and colon (13%).
- Lucas County Latino adults reported receiving the following cancer screenings:
  - Colorectal cancer in the past five years (17%)
  - Oral cancer in the past year (11%)
  - Skin cancer in the past year (4%)
  - Lung cancer in the past three years (3%)

7% of Lucas County Latino adults were diagnosed with cancer at some point in their lifetime.

Cancer Facts

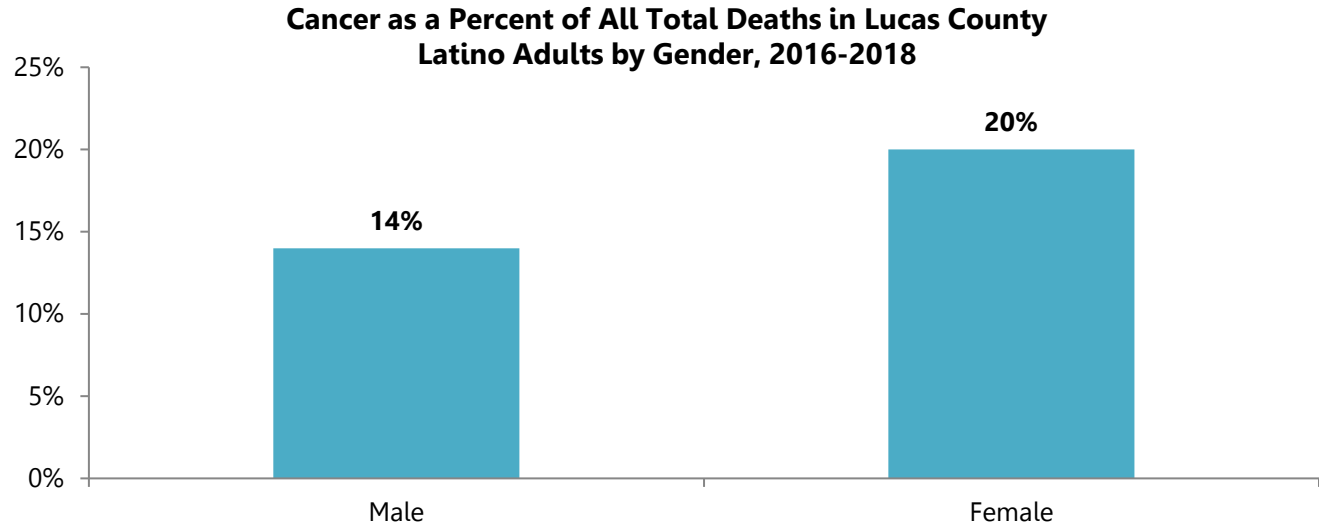
- The Ohio Department of Health (ODH) indicates that, from 2016 to 2018, cancers caused 16% (54) of all (328) Lucas County Latino resident deaths *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- The American Cancer Society states that about 606,520 Americans are expected to die of cancer in 2019. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease *(Source: American Cancer Society, Facts & Figures 2020).*
- ODH reports that liver and intrahepatic bile duct cancer (total deaths=8) caused 31% of Latino male cancer deaths from 2016 to 2018. Lung and bronchus cancer (total deaths=1) caused 4% of Latino male cancer deaths from 2016 to 2018 in Lucas County. Colorectal cancer caused 1 male death, and cancer of the prostate caused 1 male death *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- ODH reports that colorectal cancer was the leading cause of Latina female cancer deaths (total deaths=6) in Lucas County from 2016 to 2018, followed by lung and bronchus (total deaths=4), liver and intrahepatic bile duct cancer (total deaths=4), and breast cancer (total deaths=4) *(Source: Ohio Public Health Data Warehouse, 2016-2018).*

The following graph shows the Lucas County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer in comparison to the Healthy People 2020 objective.



(Source: Ohio Public Health Data Warehouse, CDC Wonder, Healthy People 2020)
**Healthy People 2020 target is not race specific.*

The following graph shows cancer as a percent of total deaths in Lucas County Latino adults.

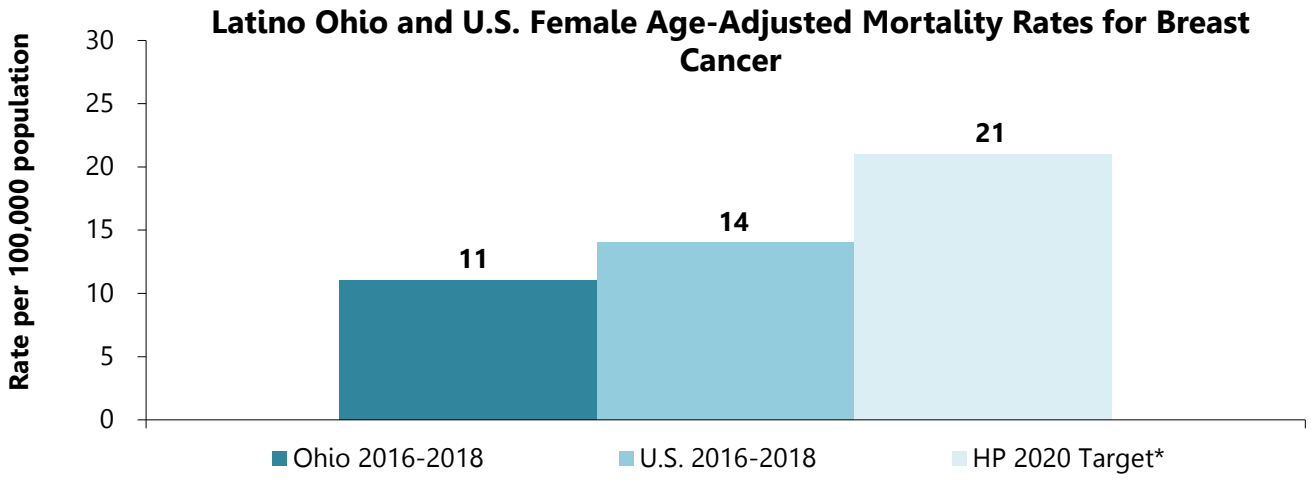


(Source: Ohio Public Health Data Warehouse, 2016-2018)

Breast Cancer

- Sixty percent (60%) of Lucas County Latina females reported having had a clinical breast examination in the past year.
- Sixty-nine percent (69%) of Lucas County Latina females over the age of 40 had a mammogram in the past year.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommend that those 40 to 44 years of age have the option to begin annual mammography, those 45 to 54 should undergo annual mammography, and those 55 years of age and older may transition to biennial mammography or continue annual mammography. Women should continue mammography as long as overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual magnetic resonance imaging (MRI) is recommended in addition to mammography, typically starting at age 30 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the Latino Ohio and U.S. age-adjusted mortality rates per 100,000 populations for breast cancer in comparison with the Healthy People 2020 objective.

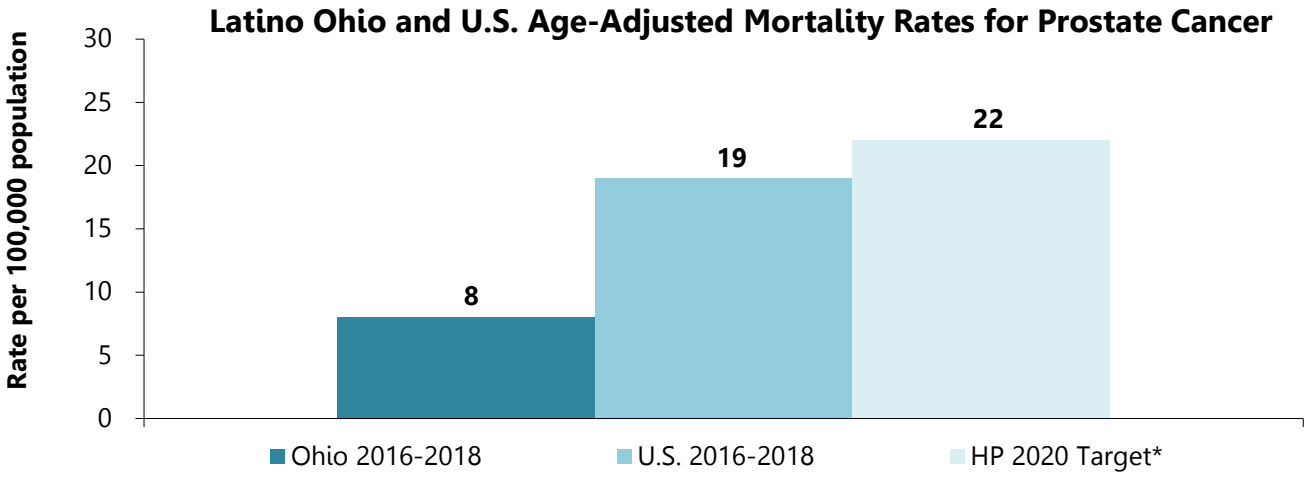


Note: Due to small numbers, the Lucas County Latina female age-adjusted mortality rate for breast cancer is not available
(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)
**Healthy People 2020 target is not race specific*

Prostate Cancer

- ODH statistics indicate that prostate cancer accounted for 4% of all Latino male cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- No organizations presently endorse routine prostate cancer screening for men at average risk because of concerns about the high rate of overdiagnosis (detecting disease that would never have caused symptoms or harm), along with the significant potential for serious side effects associated with prostate cancer treatment. The American Cancer Society recommends that beginning at age 50, men who are at average risk of prostate cancer and have a life expectancy of at least 10 years have a conversation with their health care provider about the benefits and limitations of PSA testing and make an informed decision about whether to be tested based on their personal values and preferences. Men at high risk of developing prostate cancer (Black men or those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at age 40 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graph shows the Latino Ohio and U.S. age-adjusted mortality rates per 100,000 populations for prostate cancer in comparison with the Healthy People 2020 objective.

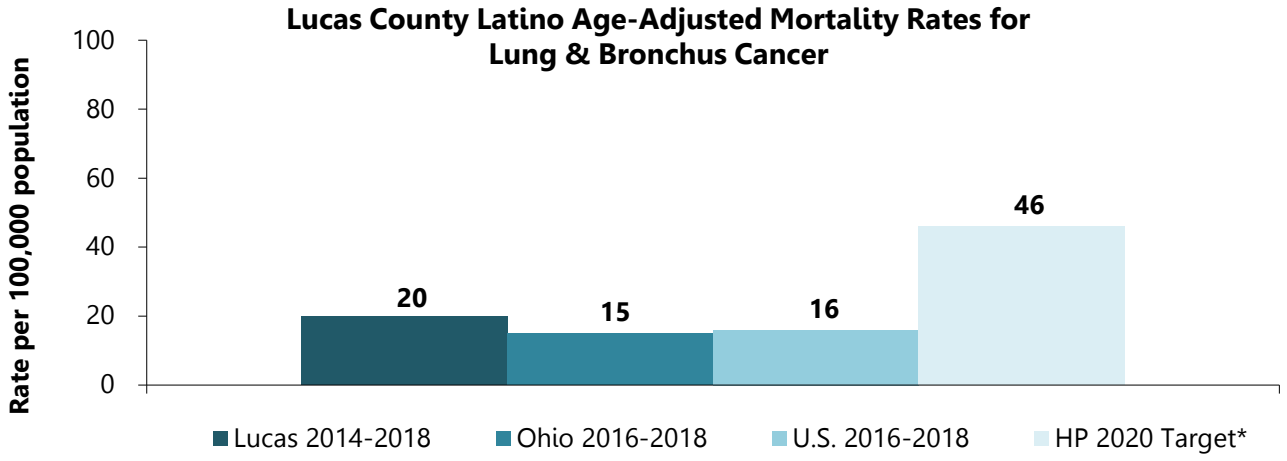


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)
**Healthy People 2020 target is not race specific*
Note: Due to small numbers, the Lucas County Latino age-adjusted mortality rate for prostate cancer is not available

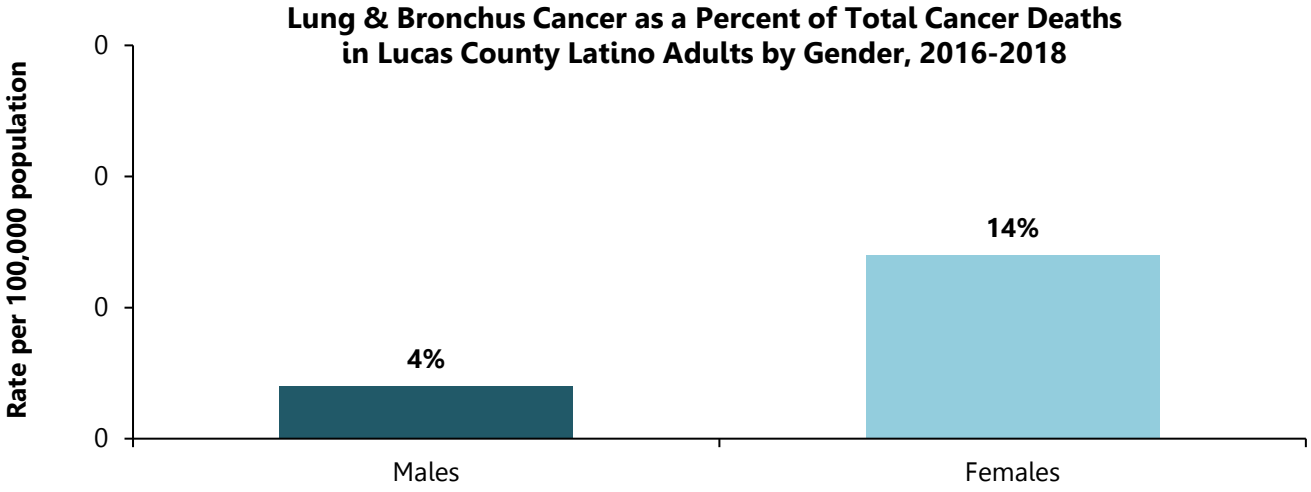
Lung Cancer

- In Lucas County, 15% of Latino male adults were current smokers and 20% were former smokers.
- According to the American Cancer Society, smoking causes 80% of Latino lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show the Latino Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for lung and bronchus cancer in comparison with the Healthy People 2020 objective, as well as by gender.



**Healthy People 2020 Target data is for lung cancer only.*
Note: Lucas County year range includes 2014-2018 due to unavailable mortality rates from 2016-2018.
(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)

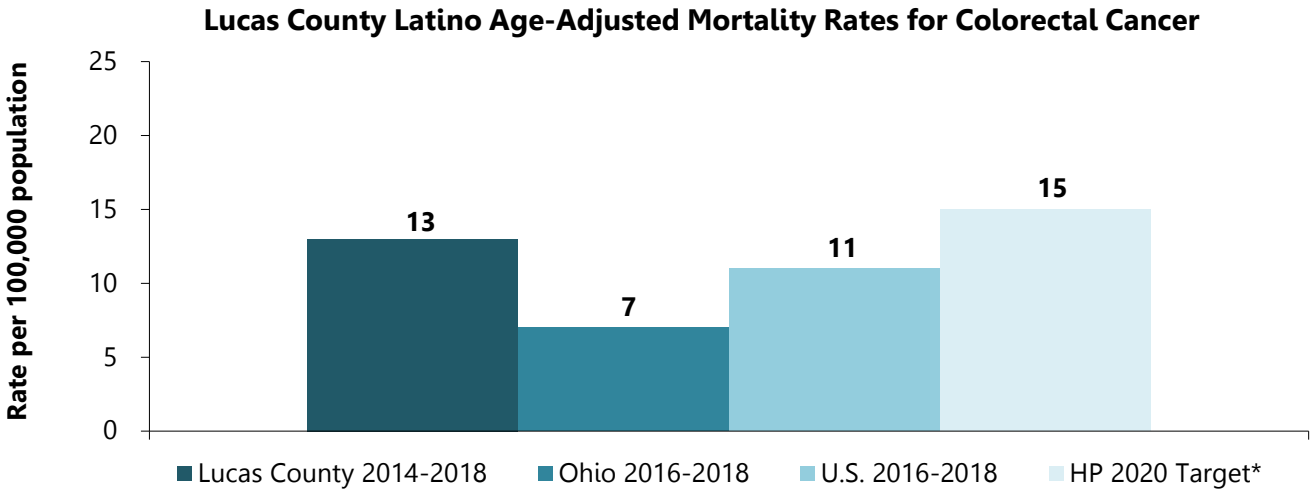


(Source: Ohio Public Health Data Warehouse 2016-2018)

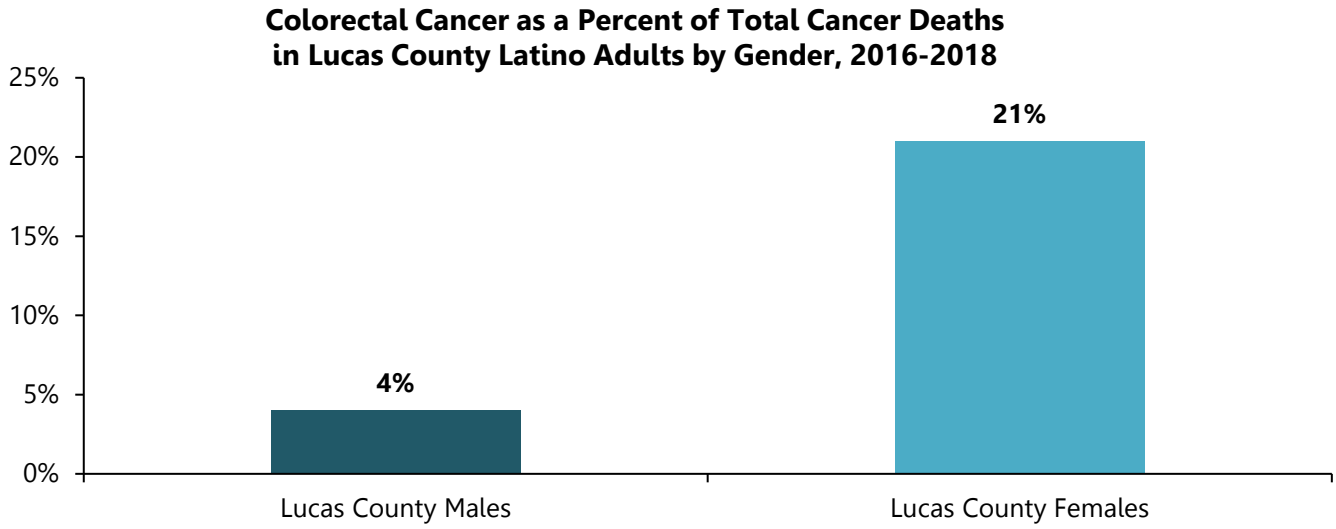
Colorectal Cancer

- ODH indicates that colorectal cancer accounted for 13% of all Latino male and Latina female cancer deaths from 2016 to 2018 in Lucas County *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- Modifiable factors that increase colorectal cancer risk include obesity, physical inactivity, long-term smoking, high consumption of red or processed meat, low calcium intake, moderate to heavy alcohol consumption, and very low intake of fruits and vegetables and whole-grain fiber. Hereditary and medical factors that increase risk include a personal or family history of colorectal cancer and/or polyps, certain inherited genetic conditions, a personal history of chronic inflammatory bowel disease, and type 2 diabetes *(Source: American Cancer Society, Facts & Figures 2020).*
- Screening can prevent colorectal cancer through the detection and removal or precancerous growths, as well as detect cancer at an early stage. Regular screenings with either stool tests or exams (e.g., colonoscopy) results in a reduction in premature colorectal cancer death. New guidelines from the American Cancer Society recommend men and women at average risk for colorectal cancer be screened starting at age 45 *(Source: American Cancer Society, Facts & Figures 2020).*

The following graphs show Latino Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for colorectal cancer in comparison with the Healthy People 2020 objective, as well as by gender.



(Source: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)
**Healthy People 2020 target is not race specific.*
Note: Lucas County year range includes 2014-2018 due to unavailable mortality rates from 2016-2018.



(Source: Ohio Public Health Data Warehouse 2016-2018)

Lucas County Latino Incidence of Cancer, 2013-2017

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Colon & Rectum	29	14.8%
Prostate	25	12.8%
Other Sites/Types	22	11.2%
Breast	17	8.7%
Liver & Intrahepatic Bile Duct	17	8.7%
Lung and Bronchus	11	5.6%
Kidney & Renal Pelvis	9	4.6%
Thyroid	9	4.6%
Bladder	7	3.6%
Pancreas	7	3.6%
Stomach	7	3.6%
Leukemia	6	3.1%
Non-Hodgkins Lymphoma	6	3.1%
Uterus	6	3.1%
Oral Cavity & Pharynx	5	2.6%
Brain and Other CNS	4	2.0%
Testis	3	1.5%
Cervix	2	1.0%
Esophagus	1	0.5%
Melanoma of Skin	1	0.5%
Multiple Myeloma	1	0.5%
Ovary	1	0.5%
Hodgkins Lymphoma	0	0.0%
Larynx	0	0.0%
Total	196	100%

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 2/7/20)

Chronic Disease: Latino Arthritis

Key Findings

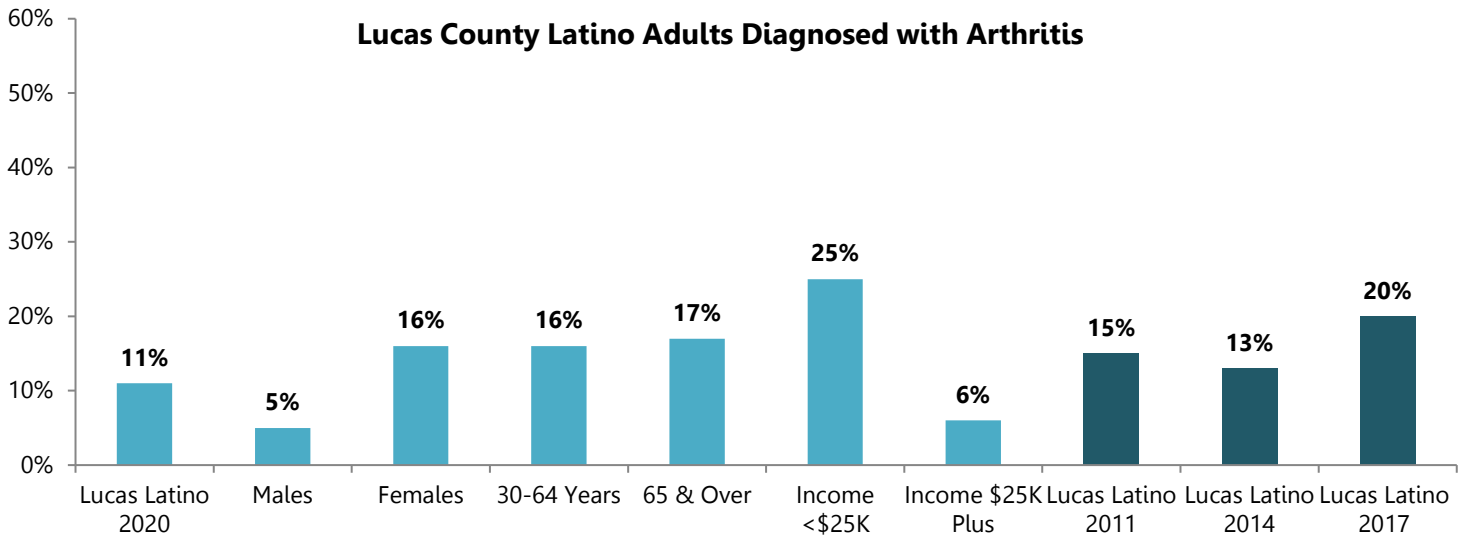
Eleven percent (11%) of Lucas County Latino adults were diagnosed with some form of arthritis.

Arthritis

- Eleven percent (11%) of Lucas County Latino adults were told by a health professional that they had some form of arthritis, increasing to 17% of those over the age of 65.
- Of those who were diagnosed, 93% were currently receiving treatment.

11% of Lucas County Latino adults were diagnosed with arthritis.

The following graph shows the percentage of Lucas County Latino adults who were diagnosed with arthritis. Examples of how to interpret the information include: 11% of Latino adults were diagnosed with arthritis, including 5% of males and 17% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Diagnosed with arthritis	18%	15%	13%	20%	11%	34%	16%

Chronic Disease: Latino Asthma

Key Findings

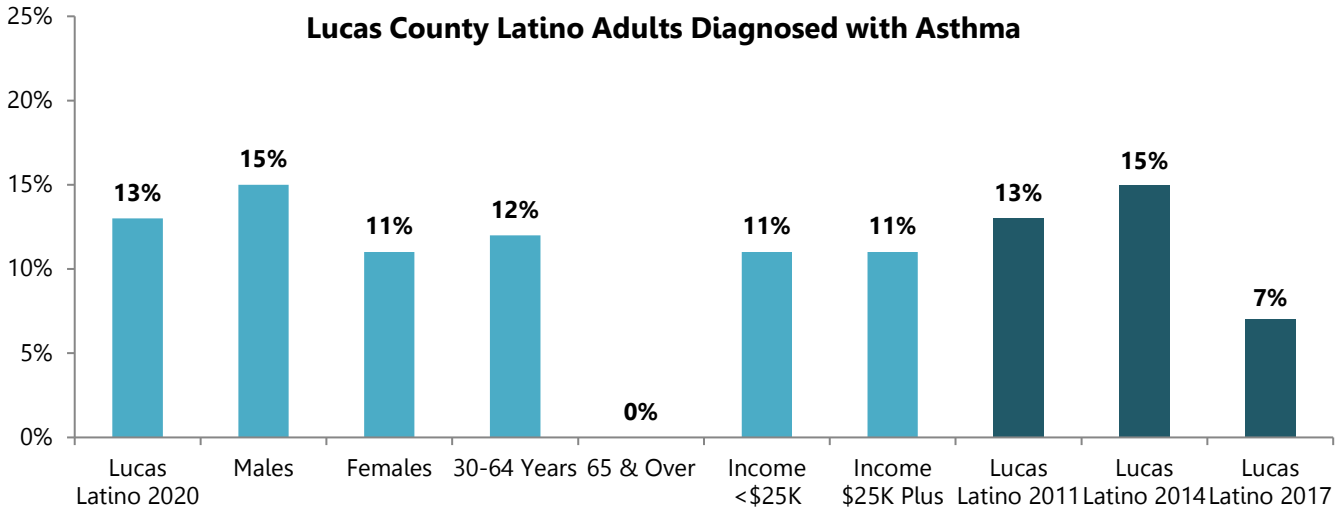
In 2020, 13% of Lucas County Latino adults were diagnosed with asthma.

Asthma and Other Respiratory Disease

- In 2020, 13% of Lucas County Latino adults were diagnosed with asthma, increasing to 15% of males.
- Seventy-one percent (71%) of Lucas County Latino adults with asthma were currently receiving treatment for the diagnosis.
- One percent (1%) of Lucas County Latino adults were diagnosed with chronic obstructive pulmonary disorder (COPD).
- One hundred percent (100%) of Lucas County Latino adults were diagnosed with chronic obstructive pulmonary disorder (COPD) were currently receiving treatment.
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; and infections linked to the flu, colds, and respiratory viruses *(Source: CDC, 2017).*
- Chronic lower respiratory disease was the sixth leading cause of Latino deaths in Lucas County and the ninth leading cause of Latino deaths in Ohio from 2016 to 2018 *(Source: Ohio Public Health Data Warehouse, 2016-2018).*

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Diagnosed with asthma	13%	13%	15%	7%	13%	24%	13%

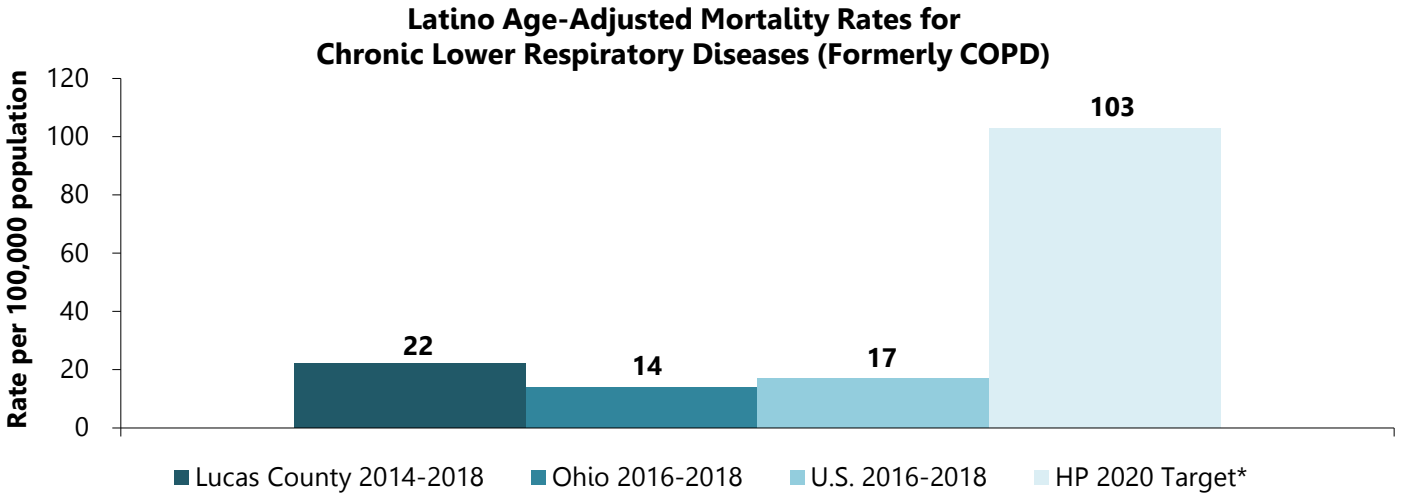
The following graph shows the percentage of Lucas County Latino adults who were diagnosed with asthma. Examples of how to interpret the information include: 13% of Latino adults were diagnosed with asthma, including 11% of females and 11% of adults with annual incomes less than $25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the Latino Lucas County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD) in comparison with the Healthy People 2020 objective. The graph shows:

- From 2014 to 2018, the Latino Lucas County age-adjusted mortality rate for chronic lower respiratory disease was lower than the Ohio rate, U.S. rate, and the Healthy People 2020 target objective rate.



(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2016-2018)
** Healthy People 2020's target rate is for adults aged 45 years and older. Healthy People 2020 target is not race specific.*
Note: Lucas County year range includes 2014-2018 due to unavailable mortality rates from 2016-2018.

Chronic Disease: Latino Diabetes

Key Findings

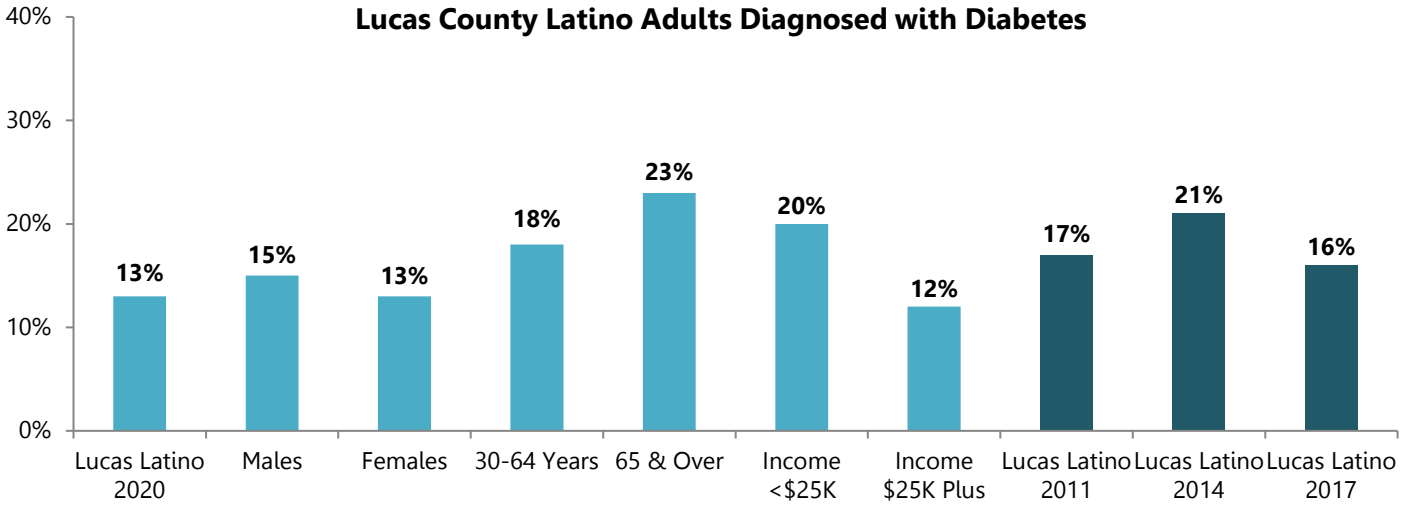
In 2020, 13% of Lucas County Latino adults were diagnosed with diabetes at some point in their lifetime. Forty-one percent (41%) of Latino adults with diabetes rated their health as fair or poor.

13% of Lucas County Latino adults were diagnosed with diabetes.

Diabetes

- Thirteen percent (13%) of Lucas County Latino adults were diagnosed with diabetes at some point in their lifetime, increasing to 23% of those over the age of 65.
- Ninety-four percent (94%) of Lucas County Latino adults diagnosed with diabetes were receiving treatment.
- A test for A1C measures the average level of blood sugar over the past three months. Seven percent (7%) of Lucas County Latino adults reported getting their A1C checked three or more times in the past year. Four percent (4%) said two times, 27% said one time, 41% said none and 22% said they did not know if they had gotten their A1C checked within the past year.
- Forty-one percent (41%) of Lucas County Latino adults with diabetes rated their health as fair or poor.
- Lucas County Latino adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - Overweight or obese (94%)
  - High blood pressure (24%)
  - High blood cholesterol (15%)

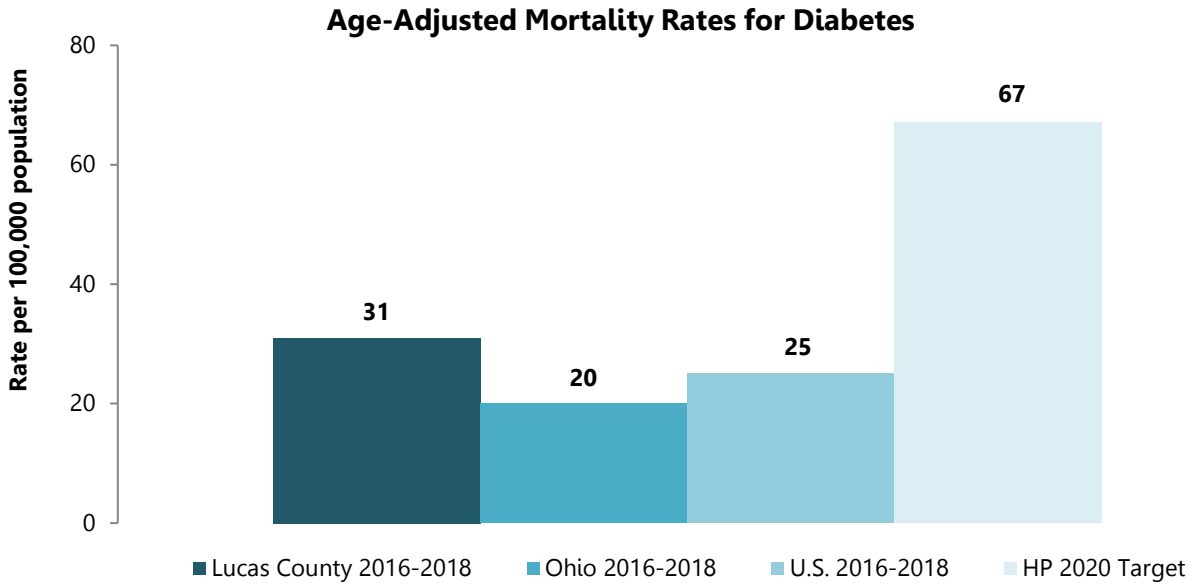
The following graph shows the percentage of Lucas County Latino adults who were diagnosed with diabetes. Examples of how to interpret the information include: 13% of Latino adults were diagnosed with diabetes, including 13% of females and 23% of adults ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show prevalence of diabetes by gender and the age-adjusted mortality rates from diabetes for Lucas County and Ohio residents with comparison to the Healthy People 2020 target objective.

- From 2016 to 2018, Lucas County's age-adjusted diabetes mortality rate was greater than the Ohio and U.S. rates, but less than the Healthy People 2020 target objective.



**The Healthy People 2020 rate is for all diabetes-related deaths. Healthy People 2020 target is not race specific.*
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2016-2018, Healthy People 2020)

Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Diagnosed with diabetes	11%	17%	21%	16%	13%	10%	12%

Chronic Disease: Latino Quality of Life

Key Findings

In 2020, 35% of Lucas County Latino adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (41%); stress, depression, anxiety or emotional problems (33%); sleep problems (31%); eye/vision problems (24%); and walking problems (22%).

35% of Lucas County Latino adults were limited in some way because of a physical, mental or emotional problem.

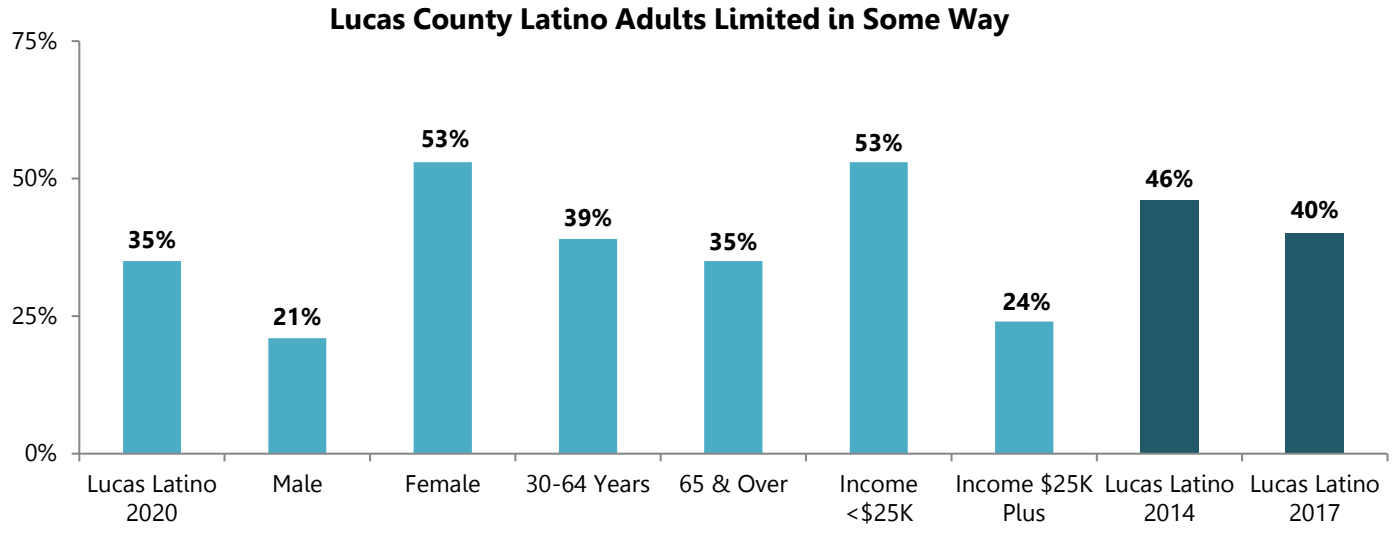
Impairments and Health Problems

- Thirty-five percent (35%) of Lucas County Latino Lucas County adults were limited in some way because of a physical, mental or emotional problem.
- Those who were limited in some way reported the following most limiting problems or impairments:
  - Back or neck problems (41%)
  - Stress, depression, anxiety, or emotional problems (33%)
  - Sleep problems (31%)
  - Eye/vision problems (24%)
  - Arthritis/rheumatism (24%)
  - Walking problems (22%)
  - Chronic illness (20%)
  - Chronic pain (20%)
  - Fitness level (18%)
  - Fractures, bone/joint injuries (18%)
  - Mental health illness/disorder (10%)
  - Lung/breathing problems (10%)
  - Hearing problems (8%)
  - Dental problems (8%)
  - Confusion (6%)
  - Memory loss (4%)
  - Learning disability (2%)
  - Substance dependency (2%)
  - Drug addiction (2%)
  - Other impairments/problems (4%)
- In the past year, Lucas County Latino adults reported needing the following services or equipment: eyeglasses or vision services (25%), canes (5%), help with routine needs (4%), help with personal care needs (4%), pain management (3%), hearing aids or hearing care (3%), personal emergency response systems (3%), medical supplies (2%), special beds (2%), walkers (2%), wheelchairs (2%), wheelchair ramps (2%), and oxygen or respiratory support (1%).
- Thirty-one percent (31%) of Lucas County Latino adults had fallen in the past year, increasing to 33% of those 65 and older.

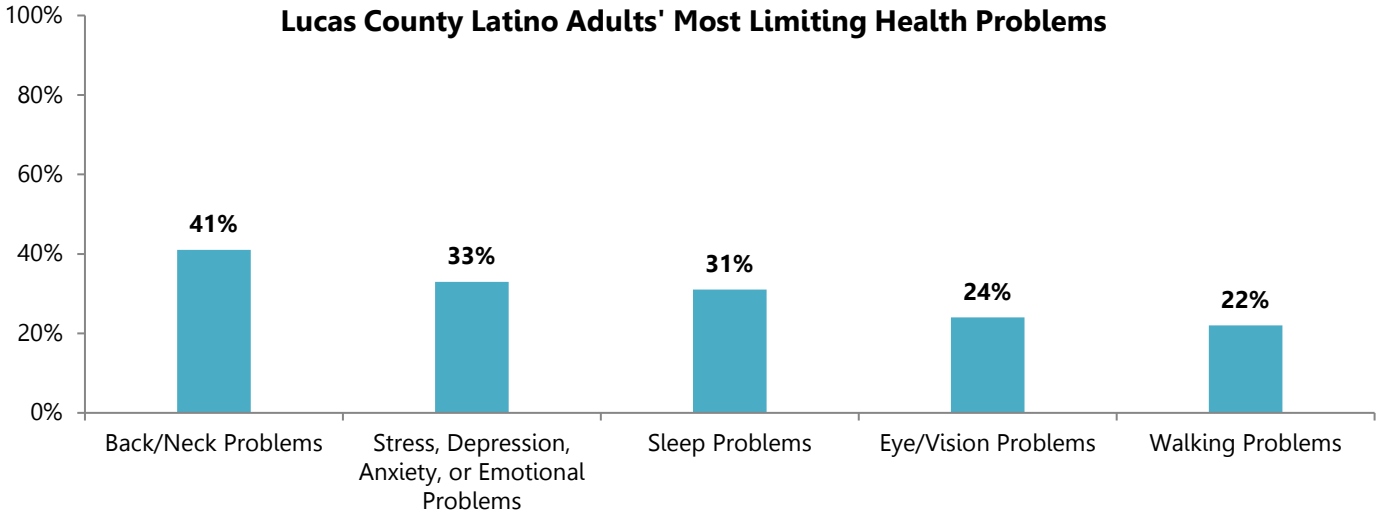
Adult Comparisons	Lucas County Latinos 2007	Lucas County Latinos 2011	Lucas County Latinos 2014	Lucas County Latinos 2017	Lucas County Latinos 2020	Ohio Latinos 2018	U.S. Latinos 2018
Limited in some way because of a physical, mental, or emotional problems	41%	N/A	46%	40%	35%	N/A	N/A

N/A – Not Available

The following graphs show the percentage of Lucas County adults that were limited in some way and the most limiting health problems. Examples of how to interpret the information on the first graph include: 35% of Lucas County adults were limited in some way, including 53% of females and 35% of those ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



Healthy People 2020*

Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Lucas County Latino 2020	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	24%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard.
**Healthy People 2020 target is not race specific.*
(Sources: Healthy People 2020 Objectives, 2019/2020 Lucas County Health Assessment)

Social Conditions: Latino Social Determinants of Health

Key Findings

In 2020, 5% of Lucas County Latino adults had to choose between paying bills and buying food. Twenty-seven percent (27%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime. Twenty-six percent (26%) of Lucas County adults kept a firearm in or around their home.

Healthy People 2020

- Healthy People 2020 developed five key determinants as a "place-based" organizing framework. These five determinants include:
  - Economic stability
  - Education
  - Social and community context
  - Health and health care
  - Neighborhood and built environment

Economic Stability

- Lucas County Latino adults reported the following about their housing situation:
  - Had housing (89%)
  - Had housing, but were worried about losing housing in the future (8%)
  - Did not have housing (1%)
  - Don't know (3%)

7% of Lucas County Latino adults experienced more than one food insecurity issue in the past year.

- Lucas County Latino adults attempted to get assistance from the following social service agencies: Job & Family Services/JFS (14%), WIC/health department (6%), food pantries (5%), Pathway (5%), friend or family member (4%), place of worship (4%), United Way (2%), legal aid (2%), free clinic (1%), and other charities (1%). Four percent (4%) of Latino adults did not know where to look for assistance, and 5% did not qualify for assistance.
- Lucas County Latino adults experienced the following food insecurity issues during the past year: loss of income led to food insecurity issues (8%), worried food would run out (8%), had to choose between paying bills and buying food (5%), food assistance was cut (5%), went hungry/ate less to provide more food for their family (3%), and were hungry but did not eat because they did not have money for food (3%).
- Eight percent (7%) of Lucas County Latino adults experienced more than one food insecurity issue in the past year.
- The median household income in Lucas County was $49,448. The U.S. Census Bureau reports median income levels of $58,642 for Ohio and $65,712 for the U.S. *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*
- Almost one-fourth (24%) of all Lucas County Latino residents were living in poverty *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimates).*
- The unemployment rate for Lucas County was 10.6 as of July of 2020 *(Source: Bureau of Labor Statistics, Local Area Unemployment Statistics).*
- In Lucas County there were 203,795 housing units. The owner-occupied housing unit rate was 60%. Rent in Lucas County cost an average of $757 per month *(Source: U.S. Census Bureau, 2019 American Community Survey 1-year Estimate).*

Lucas County Latino adults and their loved ones needed the following assistance in the past year:

Type of Assistance	Received Assistance	Did Not Know Where to Look	Did Not Need Assistance
Acquiring disability benefits	11%	4%	85%
Affordable child care	1%	8%	91%
Clothing	3%	7%	90%
Credit counseling	0%	4%	96%
Dental care	6%	3%	91%
Diapers	3%	2%	95%
Drug or alcohol addiction	3%	4%	92%
Employment	0%	3%	97%
Food	13%	8%	79%
Free tax preparation	2%	9%	89%
Gambling addiction	0%	2%	98%
Electric, gas, or water bills	6%	10%	84%
Health care	12%	3%	85%
Home repair	1%	12%	87%
Legal aid services	1%	4%	95%
Medicare	9%	5%	86%
Mental illness issues including depression	9%	3%	88%
Post incarceration transition issues	1%	3%	96%
Prescription assistance	5%	3%	92%
Rent/mortgage	1%	9%	91%
Septic/well repairs	0%	3%	97%
Transportation	4%	3%	93%
Unplanned pregnancy	0%	2%	98%
Utilities	2%	10%	88%

Social and Community Context

- Lucas County Latino adults experienced the following in the past year:
  - A close family member had to go to the hospital (47%)
  - Death of a family member or close friend (44%)
  - Had bills they could not pay (16%)
  - Someone in their household lost their job/had their hours at work reduced (14%)
  - Decline in their own health (13%)
  - Someone close to them had a problem with drinking or drugs (11%)
  - Moved to a new address (8%)
  - Knew someone who lived in a hotel (4%)
  - Was threatened or abused by someone physically, emotionally, sexually, and/or verbally (4%)
  - Their family as at risk for losing their home (4%)
  - Due to unforeseen circumstances, their household income was cut by 50% (4%)
  - They were a caregiver (4%)
  - Became separated or divorced (4%)
  - Their child was threated or abused by someone physically, emotionally, sexually, and/or verbally (3%)
  - Witnessed someone in their family being hit or slapped (2%)
  - Was homeless (1%)

- Lucas County Latino adults reported the following types of gambling: lottery/scratch-offs/office pools (35%); casino gambling (19%); sports betting with a bookie/office pools (8%); fantasy sports/online betting (7%); poker or other card games, dice, or craps (not at a casino) (4%); and bingo (3%).

- Lucas County Latino adults reported engaging in some form of gambling:
  - Daily (1%)
  - Every few days (1%)
  - Weekly (3%)
  - Every few weeks (1%)
  - Monthly (2%)
  - Every few months (17%)
  - Once or twice a year (24%)
  - Never (52%)

- Lucas County Latino adults experienced the following due to gambling: consumed more alcohol or drugs when gambling (1%) and felt the need to lie to hide the extent of their gambling (1%).

- Nine percent (9%) of Lucas County adults were threatened with abuse in the past year by the following people: a spouse or partner (58%), a child (33%), a parent (8%), another person living outside their home (8%), and someone else (25%).

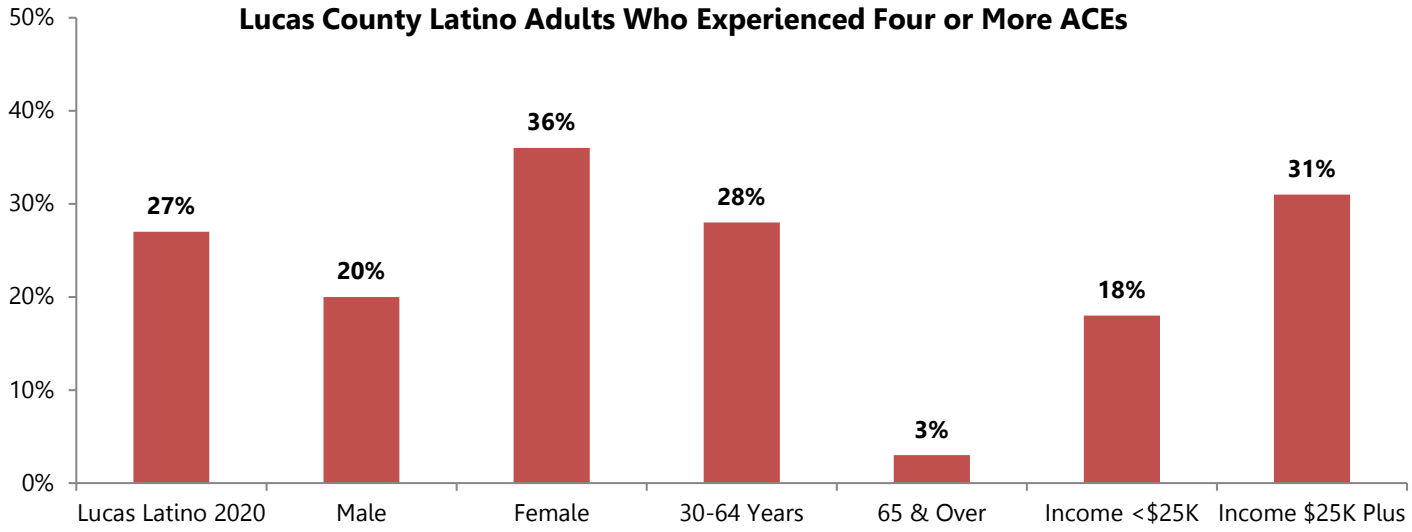
- Five percent (5%) of Lucas County adults were abused (including physical, sexual, emotional, financial and verbal) in the past year by the following individuals: a spouse or partner (100%), another person from outside the home (29%), a parent (14%), and someone else (14%).

- Adverse childhood experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They also include household dysfunction such as witnessed domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development of depression, alcoholism and alcohol abuse; depression; illicit drug use; chronic obstructive pulmonary disease; suicide attempts; and many other health problems throughout a person's lifespan *(SAMHA, Adverse Childhood Experiences, Updated on July 2, 2020).*

- Lucas County Latino adults experienced the following adverse childhood experiences (ACEs):
  - Lived with someone who was a problem drinker or alcoholic (36%)
  - Their parents became separated or were divorced (32%)
  - A parent or adult in their home swore at them, insulted them, or put them down (26%)
  - Someone at least five years older than them or an adult touched them sexually (23%)
  - Lived with someone who was depressed, mentally ill, or suicidal (22%)
  - A parent or adult in their home hit, beat, kicked, or physically hurt them (17%)
  - Their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (16%)
  - Lived with someone who served time or was sentenced to serve time in prison, jail or correctional facility (16%)
  - Lived with someone who used illegal stress drugs, or who abused prescription medications (15%)
  - Their parents were not married (15%)
  - Their family did not look out for each other, feel close to each other, or support each other (11%)
  - Someone at least five years older than them or an adult tried to make them touch them sexually (10%)
  - They didn't have enough to eat, had to wear dirty clothing, and had no one to protect them (7%)
  - Someone at least five years older than them or an adult forced them to have sex (5%)

- Twenty-seven percent (27%) of Latino adults experienced four or more adverse childhood experiences (ACEs).

The following graph shows the percentage of Lucas County Latino adults who had experienced four or more adverse child experiences (ACEs) in their lifetime. Examples of how to interpret the information on the graph include: 27% of all Lucas County Latino adults had experienced four or more ACEs in their lifetime, including 36% of females and 31% of those with annual incomes of $25,000 or higher.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between Latino adults who experienced four or more ACEs in their lifetime and participating in risky behaviors, as well as other experiences. An example of how to interpret the information includes: 61% of Latino adults who experienced four or more ACEs had seriously contemplated suicide in the past year, compared to 11% of those who did not experience any ACEs.

Behaviors of Lucas County Adults

*Experienced four or more ACEs vs. Did Not Experience Any ACEs**

Latino Adult Behaviors	Experienced four or more ACEs	Did Not Experience Any ACEs
Binge drinker (drank five or more drinks for males and four or more for females on an occasion in the past month)	85%	71%
Seriously contemplated suicide (in the past year)	61%	11%
Current drinker (had at least one alcoholic beverage in the past month)	41%	67%
Had two or more sexual partners (in the past year)	15%	9%
Current smoker (currently smoke on some or all days)	9%	11%
Misused prescription drugs (used prescription drugs either not prescribed to them or used them to get high or feel more alert in the past six months)	6%	6%

**ACEs indicate adults who self-reported having experienced four or more adverse childhood experiences in their lifetime.*
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Veterans Affair

- As a result of military service during the past 10-15 years, the following have affected Lucas County Latino veterans' immediate family members: post-traumatic stress disorder (PTSD) (4%), access to medical care at a Veterans Affair facility (4%), major health problems due to injury (2%), marital problems (2%), had problems getting Veterans Affair benefits (2%), could not find/keep a job (2%), had problems getting information on Veterans Affair eligibility and applying (2%), substance/drug abuse/overdose (2%), and housing issues (2%).

Reactions to Race

- At work within the past year, 5% of Lucas County Latino adults felt they were treated worse than people of other races. More than half (53%) of Lucas County Latino adults felt they were treated the same, and 6% reported they were treated better than people of other races at work. Eleven percent (11%) of Latino adults reported they were treated worse than people of some races and better than people of other races at work.

- Within the past year, when seeking health care, 3% of Lucas County Latino adults felt their experiences in the past year were worse than people of other races. Sixty-three percent (63%) of adults felt their experiences were the same, and 8% reported their experiences were better than people of other races when seeking health care. Three percent (3%) of Latino adults reported they were treated worse than people of some races and better than people of other races. When seeking health care.

- During the past month, 14% of Lucas County adults experienced physical symptoms (for example, a headache, an upset stomach, tensing of muscles, or a pounding heart) as a result of how they were treated based on their race, increasing to 33% of those with incomes of $25,000 or more.

- Eighteen percent (18%) of Lucas County Latino adults reported feeling emotional distress (such as anger, sad, frustrated) or was physical distress (such as experiencing a stomachache, headache, anxiety) as a result of how they were treated based on their race, ethnicity, sex, age, language, culture, religion, nationality, or sexual orientation in the past month.

- During the past month, Lucas County Latino adults felt emotionally upset as a result of how they were treated based off their:
  - Ethnicity (14%)
  - Culture (8%)
  - Skin color (7%)
  - Disability (5%)
  - Sexual orientation (3%)
  - Gender identity (1%)
  - Religion (1%)

Lucas County Latino Adults Experiences When Seeking Health Care*

Demographics	Experiences When Seeking Health Care			
	Worse than Other Races	Better than Other Races	Same as Other Races	Don't Know
Total (Latino)	2%	7%	57%	22%
White	1%	10%	53%	34%
African American	9%	0%	47%	33%

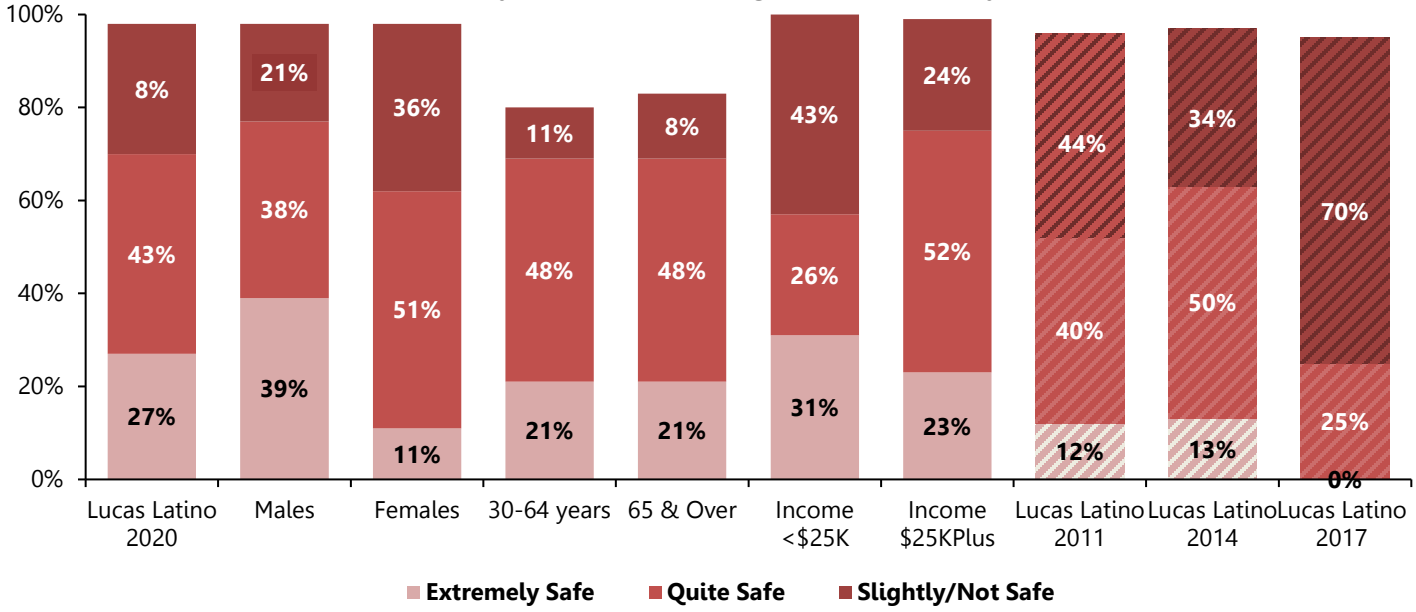
**Percentages may not equal 100% due to the exclusion of data for those who did not have health care and answered multiple responses.*

Neighborhood and Built Environment

- Just over one-quarter (27%) of Lucas County Latino adults reported that their neighborhood was extremely safe, 43% reported it to be quite safe, 21% reported it to be slightly safe, and 7% reported it to be not safe at all. Two percent (2%) reported that they did not know how safe from crime their neighborhood was.

The following graph shows the percentage of Lucas County Latino adults who described their neighborhood as extremely safe, quite safe and slightly/not safe. Examples of how to interpret the information include: 27% of all Lucas County Latino adults described their neighborhood as extremely safe, including 31% of those with incomes less than $25,000.

Lucas County Latino Adult Neighborhood Safety Perceptions*



**Respondents were asked: "How safe from crime do you consider your neighborhood to be?"*
Note: percentages may not equal 100% due to those who responded "don't know"
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

- Sixty-two percent (62%) of Lucas County Latino adults reported deliberately testing all of the smoke detectors in their home within the past year. Eight percent (8%) have never tested the smoke detectors in their home.

- Eighteen percent (18%) of Lucas County Latino adults reported the following transportation issues: cost of public or private transportation (36%), no car (27%), no driver's license/suspended license (23%), no car insurance (23%), cannot afford gas (18%), other car issues/expenses (18%), disabled (18%), limited public transportation available or accessible (18%), no public transportation available or accessible (5%), and did not feel safe to drive (5%). Nine percent (9%) of adults who reported having transportation issues had more than one issue.

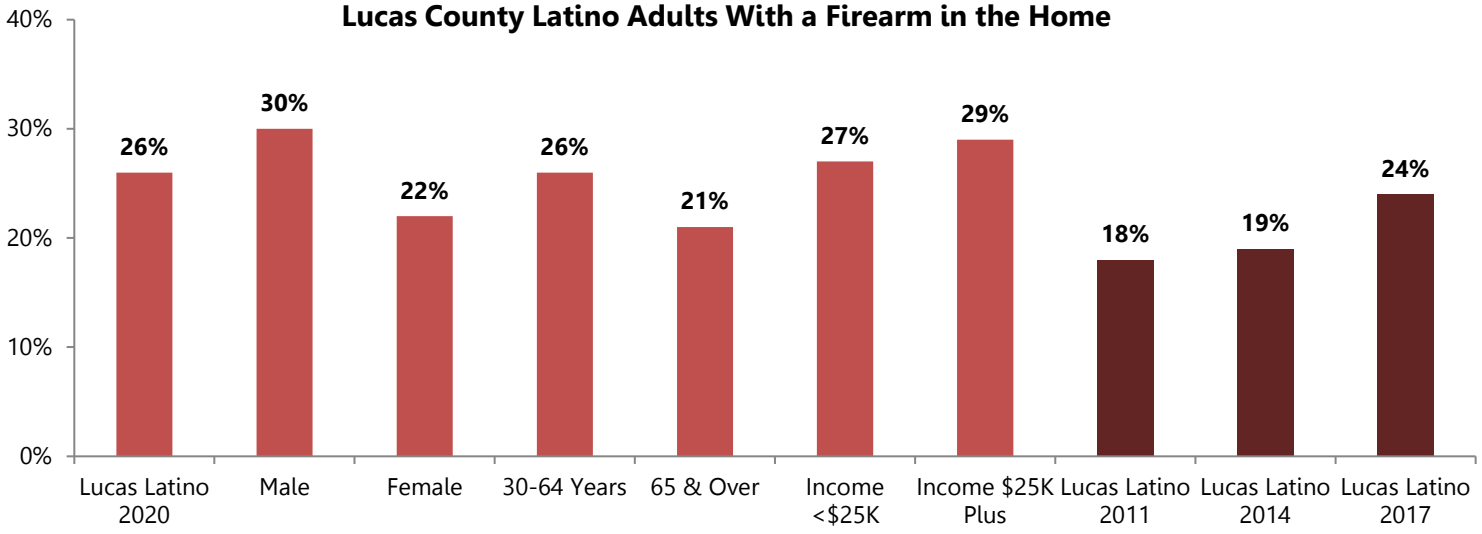
- Lucas County Latino adults indicated they use the following forms of transportation regularly: vehicle or family vehicle (88%), walk (13%), public transportation (9%), ride from a friend or family member (7%), bike (6%), and other (2%).

- Lucas County Latino adults reported doing the following while driving: talking on cell phone (57%); eating (37%); texting (36%); using cell phone other than for talking or texting (21%); used internet/apps/social media on cell phone (14%); texting (14%); driving without wearing a seatbelt (10%); being under the influence of alcohol (3%); being under the influence of recreational drugs (1%); reading (1%); and other activities (such as applying makeup, shaving, etc.) (4%). Of adult drivers, 52% had more than one distraction. Eleven percent (11%) of adults reported they did not drive.

- Twenty-six percent (26%) of Lucas County Latino adults kept a firearm in or around their home. No adult (0%) reported that their firearms were unlocked and loaded.

- Lucas County Latino adults with firearms in or around their home reported the following reasons for having them: protection (46%), hunting or sport (41%), work (22%), and other reasons (12%).

The following graph shows the percentage of Lucas County Latino adults that have a firearm in or around the home. Example of how to interpret the information include: 26% of all Lucas County Latino adults had a firearm in or around the home, including 30% of males and 27% of those with annual incomes of $25,000 or lower.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Social Conditions: Environmental Conditions

Key Findings

Lucas County Latino adults reported the following as the top four issues that threatened their health in the past year: bed bugs (10%), mold (8%), air quality (6%), and plumbing problems (5%). Ten percent (10%) of Lucas County Latino adults reported they had a disaster plan in preparation of a disaster.

10% of Latino adults reported that bed bugs threatened their or their family members' health in the past year.

Environmental Health

- Lucas County Latino adults thought the following threatened their or family members' health in the past year:
  - Bed bugs (10%)
  - Mold (8%)
  - Air quality (6%)
  - Rodents (5%)
  - Lice (5%)
  - Plumbing problems (5%)
  - Insects (4%)
  - Agricultural chemicals (3%)
  - Cockroaches (2%)
  - Unsafe water supply/wells (2%)
  - Sewage/waste water problems (2%)
  - Temperature regulation (heating and air conditioning) (2%)
  - Chemicals found in household products (2%)
  - Moisture issues (2%)
  - Radon (2%)

- Fifteen percent (15%) of Lucas County Latino adults reported more than one environmental issue that threatened their or family members' health in the past year.

Disaster Preparedness

- Lucas County Latino households had the following disaster preparedness supplies: cell phone (87%), working smoke detector (72%), computer/tablet (71%), working flashlight and working batteries (64%), three-day supply of water for everyone in the household (one gallon of water per person per day) (53%), three-day supply of nonperishable food for everyone in the household (52%), working carbon monoxide detector (49%), three-day supply of prescription medication for each person who takes prescribed medicines (41%), working battery-operated radio and working batteries (31%), communication plan (25%), home land-line telephone (18%), communication plan (13%), disaster plan (10%), and generator (8%).

- Eighty-seven percent (87%) of Lucas County Latino adults reported having more than one disaster preparedness supply. Eight percent (8%) of Lucas County Latino adults reported having none of the above disaster preparedness supplies.

Youth Health: Weight Status

Key Findings

Nearly one-fifth (17%) of Lucas County youth were obese, according to body mass index (BMI) by age. When asked how they would describe their weight, 29% of Lucas County youth reported that they were slightly or very overweight. Eighteen percent (18%) youth did not participate in at least 60 minutes of physical activity on any day in the past week. Twelve percent (12%) of youth reported they went to bed hungry at least one day per week because their family did not have enough money for food.

7,344 Lucas County youth were classified as overweight or obese.

Youth Weight Status

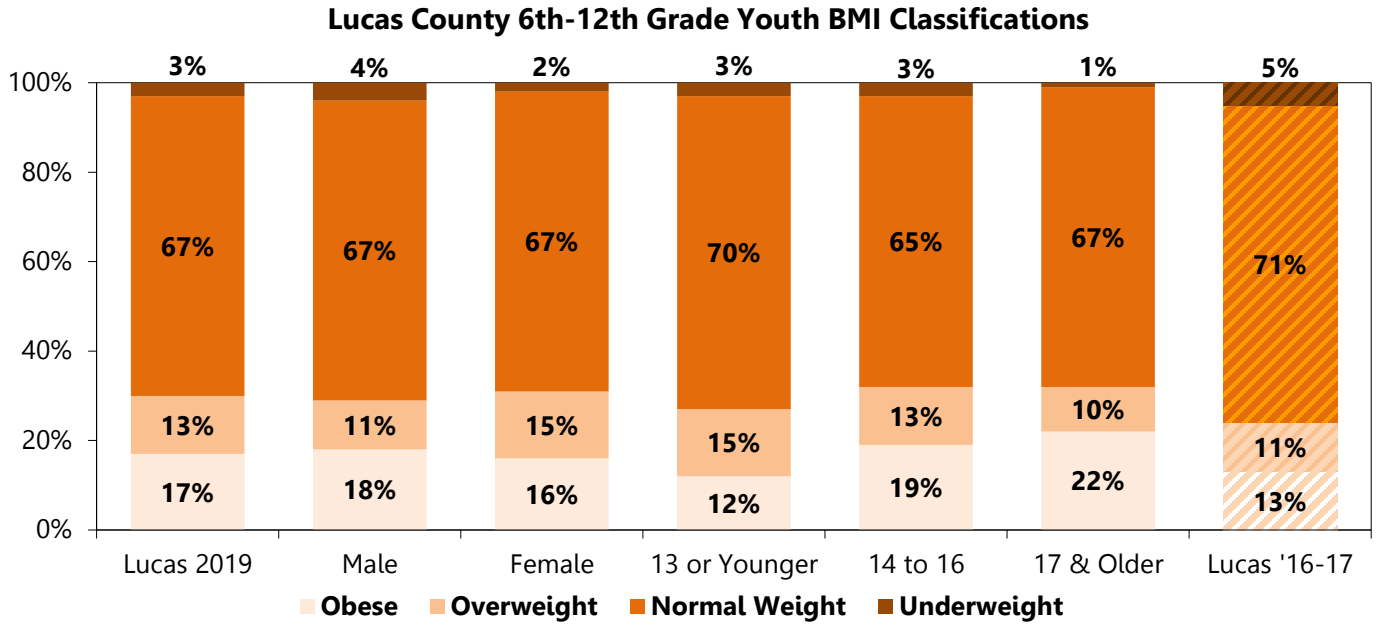
- Body mass index (BMI) for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children's body fat changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- Nearly one-fifth (17%) of Lucas County youth were classified as obese by BMI calculations. Thirteen percent (13%) of youth were classified as overweight. Sixty-seven percent (67%) were normal weight, and 3% were underweight.
- Twenty-nine percent (29%) of youth described themselves as being slightly or very overweight.
- Youth did the following to lose or keep from gaining weight in the past month:
  - Exercised (36%)
  - Drank more water (35%)
  - Ate more fruits (29%)
  - Ate less food, fewer calories, or foods lower in fat (26%)
  - Ate more vegetables (23%)
  - Skipped meals (17%)
  - Went without eating for 24 hours or more (6%)
  - Vomited or took laxatives (2%)
  - Took diet pills, powders, or liquids without a doctor's advice (2%)
  - Smoked cigarettes or e-cigarettes/vapes (1%)
  - Used illegal drugs (1%)
- Thirty-nine percent (39%) of youth did not do anything to lose or keep from gaining weight.

Healthy People 2020
Nutrition and Weight Status (NWS)

Objective	Lucas County 2019	U.S. 2017	Healthy People 2020 Target
NWS-10.4 Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese	17% (6-12 Grade) 19% (9-12 Grade)	15% (9-12 Grade)	15%

Note: The Healthy People 2020 target is for children and youth aged 2-19 years.
(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019/2020 Lucas County Health Assessment)

The following graph shows the percentage of Lucas County youth who were classified as obese, overweight, normal weight or underweight according to body mass index (BMI) by age. An example of how to interpret the information includes: 67% of all Lucas County youth were classified as normal weight, 17% were obese, 13% were overweight, and 3% were underweight.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Nutrition

- Twelve percent (12%) of youth reported they went to bed hungry at least one day per week because their family did not have enough money for food. Two percent (2%) of youth went to bed hungry every night of the week.
- Twenty-seven percent (27%) of youth ate five or more servings of fruits **and/or** vegetables per day; 34% of youth ate three to four servings; and 33% of youth ate one to two servings. Six percent (6%) of youth ate zero servings of fruits and/or vegetables per day.
- Youth reported their family got most of their food from the following places: grocery store (94%), fast-food restaurant (2%), convenience/corner store (1%), food pantry (1%), church/place of worship (<1%), and other (<1%).

The table below indicates the number of servings Lucas County youth had of fruit, vegetables, sugar-sweetened beverages and caffeinated beverages per day.

	Five or more servings	Three to four servings	One to two servings	Zero servings
Fruit	7%	18%	65%	10%
Vegetables	5%	15%	63%	17%
Sugar-sweetened beverages	9%	19%	55%	17%
Caffeinated beverages	6%	9%	42%	43%

Youth Physical Activity

- During the past week, youth participated in at least 60 minutes of physical activity at the following frequencies:
  - Three or more days (61%)
  - Five or more days (40%)
  - Every day (21%)
  - Zero days (18%)

The CDC recommends that children and adolescents participate in at least sixty minutes of physical activity per day. As part of their sixty minutes per day; aerobic activity, muscle strengthening, and bone strengthening are three distinct types of physical activity that children should engage in, appropriate to their age. Children should participate in each of these types of activity on at least three days per week *(Source: CDC Healthy Schools, November 14, 2018).*

- Lucas County youth spent an average of 4.0 hours on a cell phone, 1.6 hours watching TV, 1.5 hours playing video games, and 1.4 hours on a computer/tablet on an average day of the week.

- One-fifth (20%) of youth spent three or more hours watching TV on an average school day.

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Obese	17%	15%	13%	15%	19%	17%	16%
Overweight	13%	11%	11%	12%	12%	12%	16%
Described themselves as slightly or very overweight	29%	25%	25%	30%	33%	N/A	32%
Exercised to lose weight (in the past month)	36%	43%	48%	42%	36%	N/A	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past month)	26%	28%	31%	26%	30%	N/A	N/A
Went without eating for 24 hours or more (in the past month)	6%	7%	6%	4%	6%	N/A	N/A
Took diet pills, powders, or liquids without a doctor's advice (in the past month)	2%	3%	2%	1%	2%	N/A	N/A
Vomited or took laxatives (in the past month)	2%	3%	3%	1%	3%	N/A	N/A
Ate one to four servings of fruits and vegetables per day	67%	82%	81%	87%	70%	N/A	N/A
Physically active at least 60 minutes per day on every day in past week	21%	28%	28%	23%	20%	23%	23%
Physically active at least 60 minutes per day on five or more days in past week	40%	43%	50%	44%	40%	43%	44%
Did not participate in at least 60 minutes of physical activity on any day in the past week	18%	15%	15%	14%	18%	21%	17%
Watched three or more hours per day of television (on an average school day)	20%	40%	34%	18%	18%	N/A	20%

N/A – Not Available

Youth Health: Tobacco Use

Key Findings

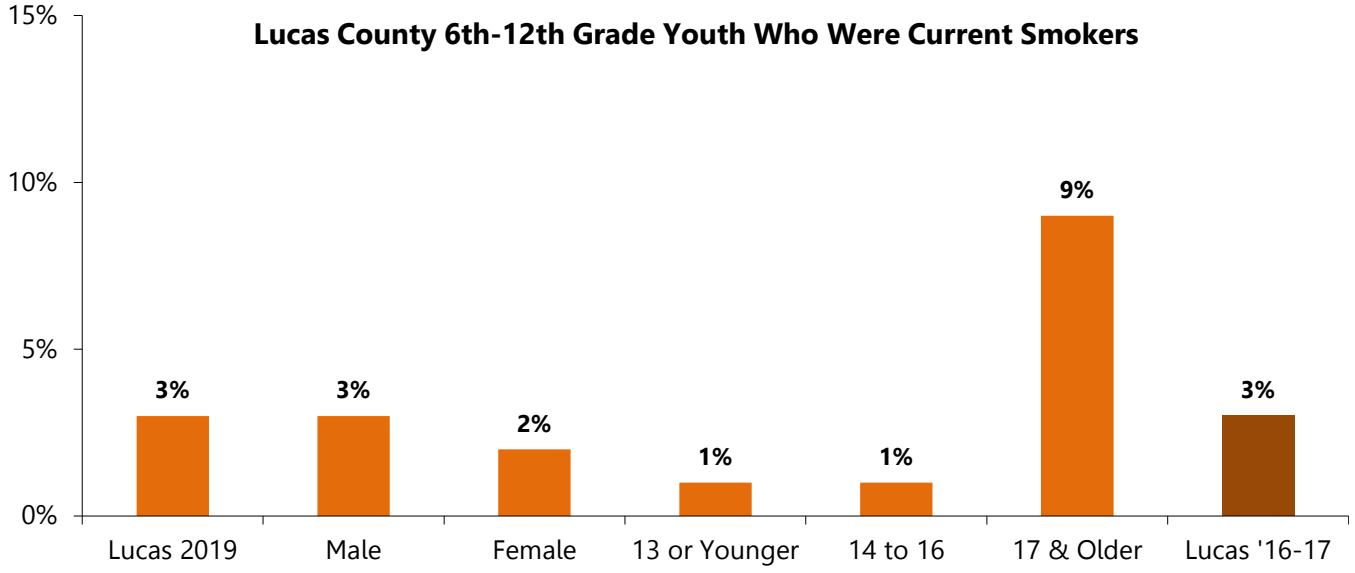
Three percent (3%) of Lucas County youth were current smokers (having smoked at some time in the past month). Twelve percent (12%) of youth used e-cigarettes/vapes in the past year. Of youth who had used e-cigarettes/vapes in the past year, 56% put e-liquid or e-juice with nicotine in them.

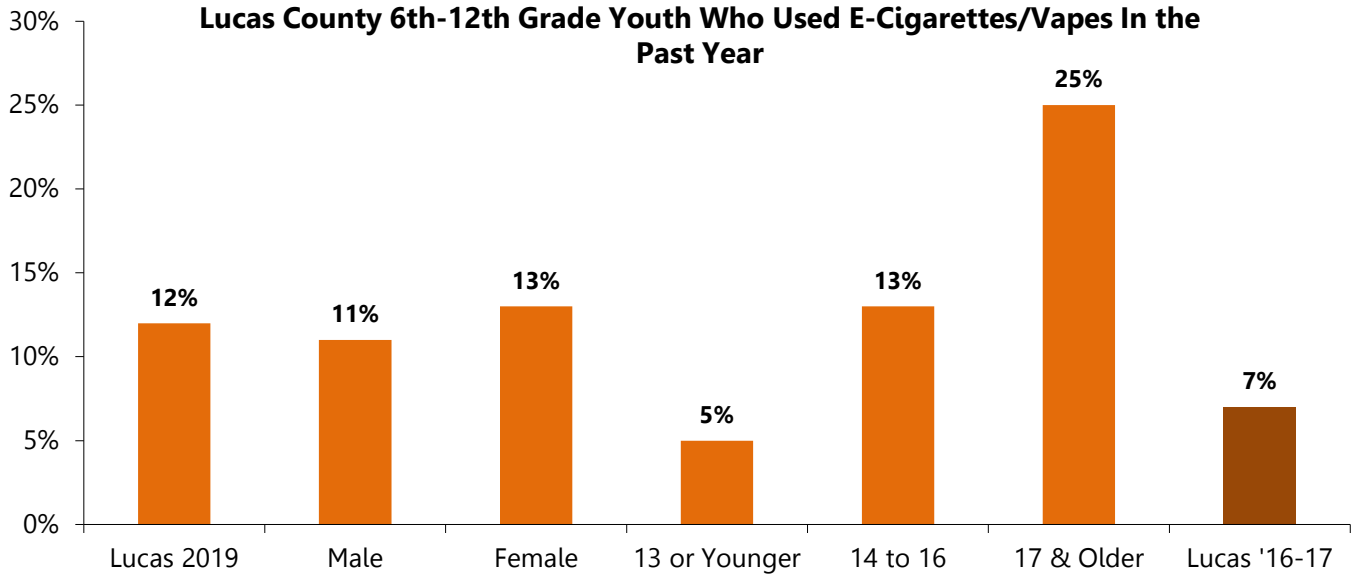
6,048 Lucas County youth used e-cigarettes/vapes in the past year.

Youth Tobacco Use

- Five percent (5%) of all Lucas County youth had tried cigarette smoking before the age of 13.
- Nearly one-fourth (24%) of those who had tried cigarette smoking did so at 10 years old or younger, and another 15% had done so by 12 years old. The average age of onset for smoking was 12.6 years old.
- Three percent (3%) Lucas County youth were current smokers, having smoked at some time in the past month.
- Nearly three-fourths (73%) of youth who identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past month.
- During the past year, 47% of youth who used tobacco tried to quit using all tobacco products, including cigarettes, cigars, smokeless tobacco, shisha or hookah tobacco, and electronic vapor products.
- Youth used the following forms of tobacco in the past year:
  - E-cigarettes/vapes (e.g., JUUL) (12%)
  - Swishers (5%)
  - Black and Mild (4%)
  - Cigarettes (2%)
  - Hookah (2%)
  - Cigarillos (1%)
  - Cigars (1%)
  - Chewing tobacco, snuff, or dip (1%)
  - Pouch (Snus) (1%)
  - Little cigars (<1%)
- Of youth that had used e-cigarettes/vapes in the past year, they reported putting the following in them:
  - E-liquid or e-juice with nicotine (56%)
  - E-liquid or e-juice without nicotine (41%)
  - Marijuana or THC in the e-liquid (38%)
- Over two-fifths (41%) of youth thought there was a great risk in harming themselves physically or in other ways if they used electronic vapor products. Thirteen percent (13%) of youth thought there was no risk in using electronic vapor products.
- Youth reported being exposed to secondhand smoke in the following places: home (23%), other relatives' home (23%), car (19%), a friend's home (10%), fairgrounds (5%), and park/ball field (4%).

The following graphs show the percentage of Lucas County youth who were current smokers and those who used e-cigarettes/vapes in the past year. An example of how to interpret the information on the first graph includes: 3% of all Lucas County youth were current smokers, including 3% of males and 9% of those ages 17 and older.





Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Healthy People 2020

Tobacco Use (TU)

Objective	Lucas County 2019	U.S. 2017	Healthy People 2020 Target
TU-2.2 Reduce use of cigarettes by adolescents (past month)	3% (6-12 Grade) 4% (9-12 Grade)	9% (9-12 Grade)	16%

Note: The Healthy People 2020 target is for youth in grades 9-12.
(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019/2020 Lucas County Health Assessment)

The table below indicates correlations between current smokers and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 73% of current smokers had at least one drink of alcohol in their past month, compared to 11% of non-current smokers.

Behaviors of Lucas County Youth

Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Smoker	Non-Current Smoker
Currently participate in extracurricular activities	75%	83%
Had at least one drink of alcohol (in the past month)	73%	11%
Had sexual intercourse (in their lifetime)	69%	17%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	68%	37%
Used marijuana (in the past month)	58%	10%
Bullied (in the past year)	56%	33%
Misused prescription medication (in the past month)	48%	6%
Seriously considered attempting suicide (in the past year)	46%	17%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	44%	25%
Attempted suicide (in the past year)	42%	9%

"Current smokers" indicate youth who self-reported smoking at any time during the past month.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Currently smoked cigarettes (on at least one day during the past month)	3%	18%	9%	5%	4%	5%	6%
First tried cigarette smoking before the age of 13 (even one or two puffs)	5%	6%	5%	4%	4%	N/A	7%**
Tried to quit using all tobacco products (during the past year)	47%	46%*	40%*	34%*	31%	N/A	48%
Currently frequently smoked cigarettes (on 20 or more days during the past month)	1%	N/A	N/A	2%	1%	1%	1%

**Tried to quit smoking only cigarettes*
N/A-Not Available
***2018 U.S. YRBSS Data*

E-Cigarettes and Youth: What Educators Need to Know

- **What are e-cigarettes?**
  - E-cigarettes are battery-powered devices that deliver nicotine, flavorings, and other ingredients to the user. E-cigarette use is sometimes called "vaping." E-cigarettes do not create harmless water vapor – they create an aerosol that contains harmful chemicals.
  - Since 2014, e-cigarettes are the most commonly used tobacco product among youth.
  - In 2018, the CDC and FDA data indicated that more than 3.6 million youth in the U.S. were past month e-cigarette users.
  - From 2017-2018, e-cigarette use skyrocketed, leading the U.S. Surgeon General to call the use of these products an epidemic.
- **What are the risks for youth?**
  1. Most e-cigarettes contain nicotine, which is highly addictive. Nicotine exposure can cause harmful brain development; impact learning, memory, and attention; and increase risk for future addiction to other drugs.
  2. Young people who use e-cigarettes may be more likely to use regular cigarettes.
  3. E-cigarette aerosol may contain substances including cancer causing chemicals, flavorings that have been linked to lung disease, heavy metals such as tin, nickel and lead, etc.

(Source: CDC, Smoking and Tobacco Use, 12/5/19)

Youth Health: Alcohol Consumption

Key Findings

In 2019, 12% of youth had at least one drink in the past month, defining them as a current drinker. Of those who drank, 57% were defined as binge drinkers. Fourteen percent (14%) of all Lucas County youth had ridden in a car driven by someone who had been drinking alcohol in the past month.

24,623 youth were considered binge drinkers.

Youth Alcohol Consumption

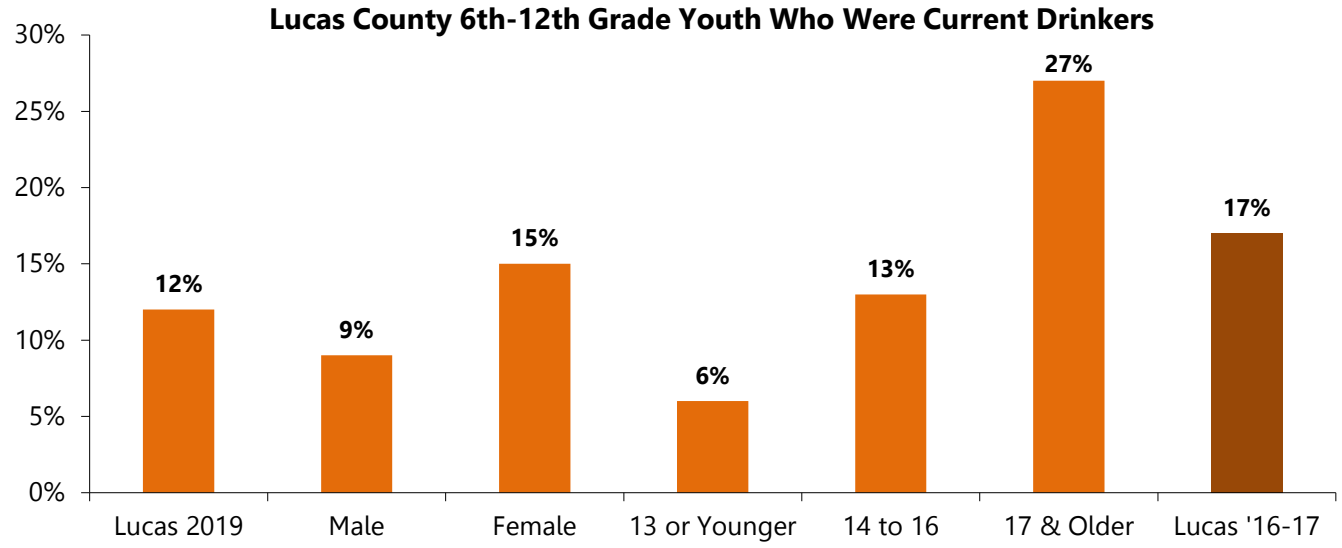
- Twelve percent (12%) of Lucas County youth had at least one drink in the past month, increasing to 27% of those ages 17 and older.
- Based on all youth surveyed, 7% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers, increasing to 17% of those ages 17 and older. Of those who drank, 57% were defined as binge drinkers.
- Of all youth, 12% had drunk alcohol for the first time before the age of 13.
- Over one-third (37%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 30% took their first drink between the ages of 13 and 14, and 34% started drinking between the ages of 15 and 18. The average age of onset was 13.1 years old.
- Youth drinkers reported the following ways of obtaining their alcohol:
  - Someone gave it to them (34%)
  - An older friend or sibling bought it for them (23%)
  - A parent gave it to them (18%)
  - Someone older bought it (16%)
  - Took it from a store or family member (11%)
  - A friend's parent gave it to them (6%)
  - Bought it in a liquor store, convenience store, supermarket, discount store, or gas station (4%)
  - Used a fake ID (2%)
  - Some other way (24%)
- During the past month, 14% of all Lucas County youth had ridden in a car driven by someone who had been drinking alcohol.
- Four percent (4%) of youth drivers had driven in a car in the past month after they had been drinking alcohol.

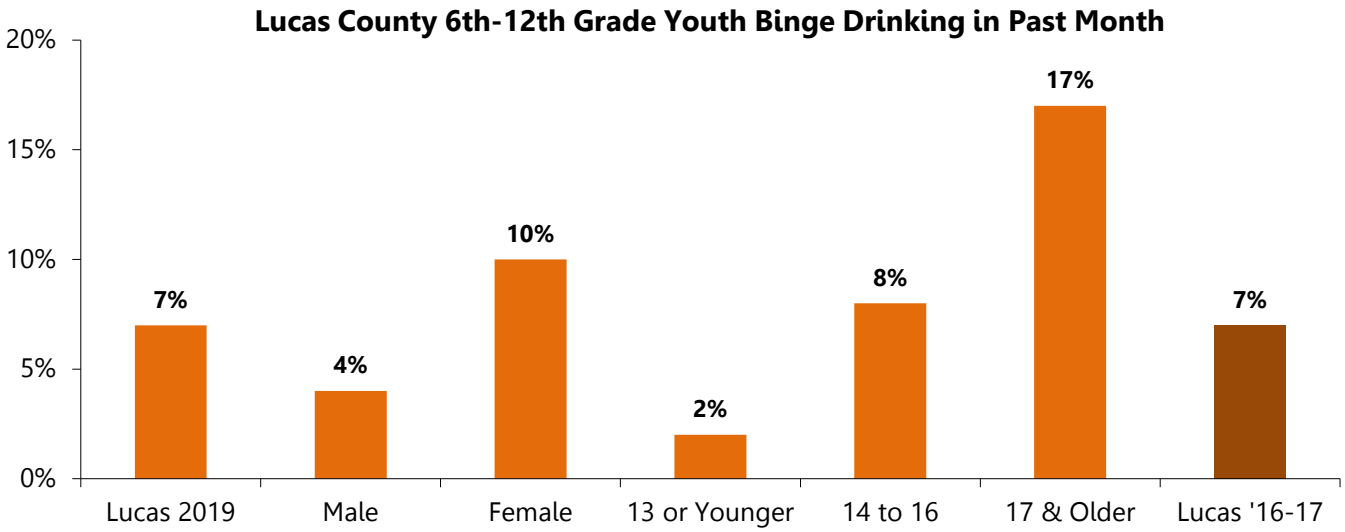
Healthy People 2020
Substance Abuse (SA)

Objective	Lucas County 2019	U.S. 2017	Healthy People 2020 Target
SA-14.4 Reduce the proportion of persons engaging in binge drinking during the past month	7% (6-12 Grade) 12% (9-12 Grade)	14% (9-12 Grade)	9%

Note: The Healthy People 2020 target is for youth aged 12-17 years.
(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019/2020 Lucas County Health Assessment)

The following graphs show the percentage of Lucas County youth who were current drinkers and youth who binge drank in the past month. An example of how to interpret the information on the first graph includes: 12% of all Lucas County youth were current drinkers, including 15% of females and 27% of youth 17 and over.





Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between current drinkers and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 51% of current drinkers had sexual intercourse in their lifetime, compared to 14% of non-current drinkers.

Behaviors of Lucas County Youth

Current Drinkers vs. Non-Current Drinkers

Youth Behaviors	Current Drinker	Non-Current Drinker
Currently participate in extracurricular activities	91%	81%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	60%	35%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	51%	21%
Had sexual intercourse (in their lifetime)	51%	14%
Bullied (in the past year)	48%	31%
Have used marijuana (in the past month)	39%	8%
Seriously considered attempting suicide (in the past year)	34%	14%
Misused prescription medication (in the past month)	21%	5%
Attempted suicide (in the past year)	19%	8%
Smoked cigarettes (in their lifetime)	14%	1%

"Current drinkers" indicate youth who self-reported having had at least one drink of alcohol during the past month.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Preventing Teen Drinking and Driving: What Works?

- **Minimum legal drinking age** (MLDA) laws in every state make it illegal to sell alcohol to anyone under the age of 21. Research has shown that enforcement of MLDA laws, including compliance checks, has reduced retail sales of alcohol to those under the legal age.
- **Zero tolerance laws** make it illegal for those under age 21 to drive after drinking any alcohol. Research has shown that these laws have reduced drinking and driving crashes among teens.
- **Graduated driver licensing** (GDL) systems help new drivers get more experience under less risky conditions. As teens move throughout the different stages, they gain more privileges (such as driving at night, driving with a passenger, etc.). Every state has a GDL system, but the rules may differ from state to state. Research indicates GDL systems prevent crashes.
- **Parent involvement**, with a focus on monitoring and restricting what new drivers are allowed to do, helps keep teens safe as they learn to drive. Parents may consider creating and signing a parent-teen driving agreement with their teens. Research shows when parents enforce rules, new drivers report lower rates of risky driving, crashes, and violations.

(Source: CDC, Teen Drinking and Driving, updated on August 2, 2018)

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th–12th)
Current drinker (at least one drink of alcohol on at least one day during the past month)	12%	39%	28%	27%	19%	26%	29%
Binge drinker (drank five or more drinks within a couple of hours on at least one day during the past month)	7%	23%	21%	13%	12%	13%	14%
Obtained the alcohol they drank by someone giving it to them (of youth drinkers)	34%	21%	14%	N/A	31%	N/A	41%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on one or more occasion during the past month)	14%	25%	21%	19%	14%	N/A	17%
Drove when they had been drinking alcohol (of youth drivers on one or more occasion during the past month)	4%	9%	5%	6%	4%	N/A	5%
Drank for the first time before age 13 (of all youth)	12%	18%	12%	8%	8%	16%	15%

N/A – Not Available

Youth Health: Drug Use

Key Findings

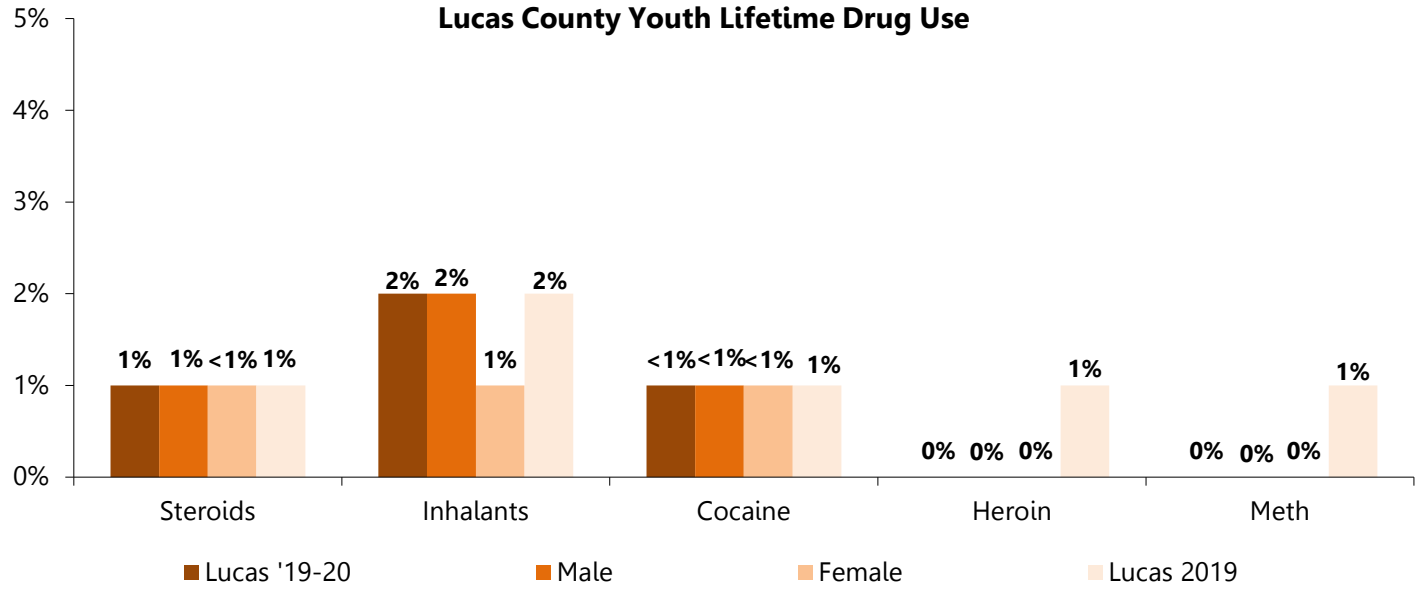
Twelve percent (12%) of Lucas County youth had used marijuana at least once in the past month. Twelve percent (12%) of youth used Ritalin, Adderall, Concerta, or other ADHD medications not prescribed for them or took more than was prescribed to feel good or get high at some time in their lifetime.

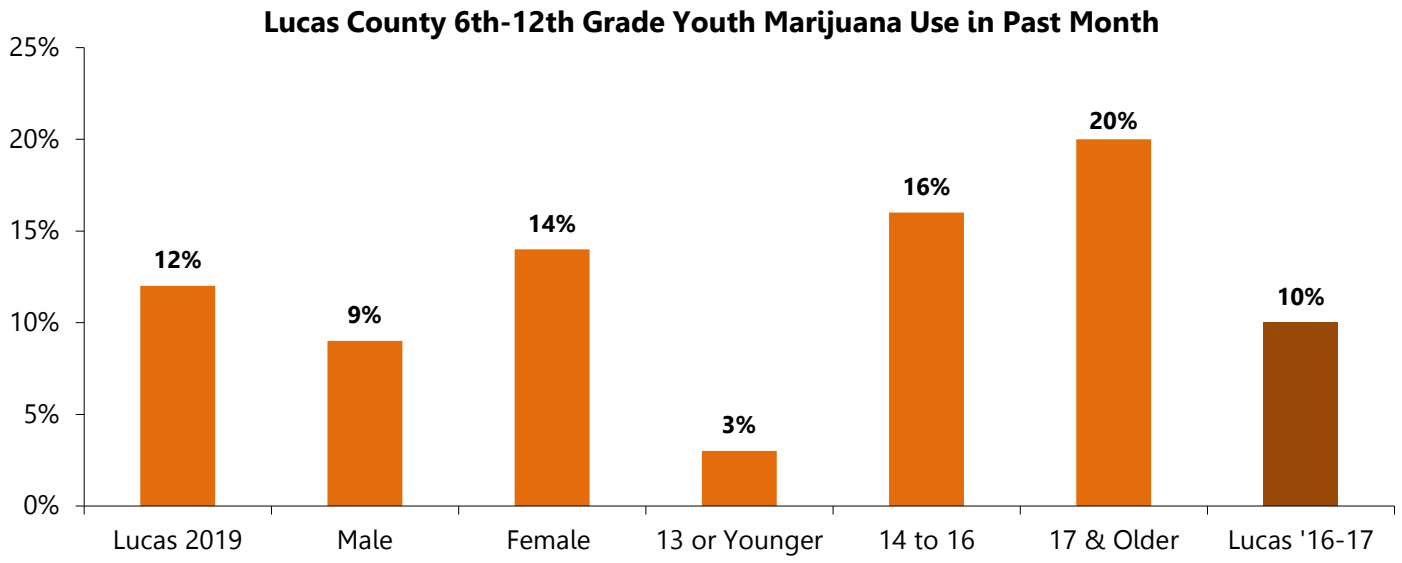
5,184 Lucas County youth were current marijuana users.

Youth Drug Use

- Twelve percent (12%) of Lucas County youth had used marijuana or hashish at least once in the past month, increasing to 20% of those ages 17 and over.
- Six percent (6%) of youth had tried marijuana for the first time before the age of 13, increasing to 7% of females.
- Youth who misused prescription medications got them in the following ways: a parent gave it to them (62%), a friend gave it to them (23%), bought it from someone else (12%), another family member gave it to them (12%), bought it from a friend (11%), took it from a friend or family member (8%), and the Internet (5%).
- Lucas County youth had tried the following in their life:
  - Liquid THC (5%)
  - Misused cough syrup (3%)
  - Inhalants (2%)
  - Posh/salvia/synthetic marijuana (2%)
  - Misused over-the-counter medication (2%)
  - Steroid pills, creams, or shots without a doctor's prescription (1%)
  - Ecstasy/MDMA/Molly (1%)
  - Bath salts (<1%)
  - Went to a pharm party/skittles (<1%)
  - Cocaine (<1%)
  - K2/spice (<1%)
  - Misused hand sanitizer (<1%)
- Youth used the following medications in their life that were not prescribed to them or took more than prescribed to feel good or high, more active or alert: Ritalin, Adderall, Concerta, or other ADHD medications (12%); tranquilizers (6%); Codeine, Demerol, Morphine, Percodan or Dilaudid (2%); OxyContin (2%), Vicodin (2%); Fentanyl (2%); steroids (1%); and Ultram (1%).
- Youth reported the following would keep them from seeking help to quit using alcohol, tobacco, or other drugs: might get in trouble (21%), don't know where to go (16%), time (10%), cost (7%), and transportation (3%). Fifty-two percent (52%) of youth reported that they do not think they need help, and 11% reported they did not want to quit.

The following graphs show youth lifetime drug use and youth marijuana use in the past month. An example of how to interpret the information on the first graph includes: 2% of youth used inhalants at some point in their life, including 2% of males and 1% of females.





Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between 30-day marijuana use and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 54% of current marijuana users had sexual intercourse in their lifetime, compared to 14% of non-current marijuana users.

Behaviors of Lucas County Youth

Current Marijuana Use vs. Non-Current Marijuana Use

Youth Behavior	Current Marijuana User	Non-Current Marijuana User
Currently participate in extracurricular activities	79%	83%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	73%	34%
Had sexual intercourse (in their lifetime)	54%	14%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	49%	22%
Seriously considered attempting suicide (in the past year)	41%	14%
Attempted suicide (in the past year)	26%	7%
Misused prescription medication (in the past month)	22%	5%

"Current marijuana use" indicates youth who self-reported using marijuana at any time during the past month.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Currently used marijuana (in the past month)	12%	26%	19%	18%	16%	16%	22%
Ever used cocaine (in their lifetime)	<1%	4%	3%	2%	<1%	4%	4%
Ever used heroin (in their lifetime)	0%	2%	1%	1%	0%	2%	2%
Ever used methamphetamines (in their lifetime)	0%	3%	2%	1%	0%	N/A	2%
Ever took steroids without a doctor's prescription (in their lifetime)	1%	4%	4%	1%	1%	N/A	2%
Ever used inhalants (in their lifetime)	2%	9%	5%	3%	2%	8%	6%
Ever used ecstasy (also called MDMA in their lifetime)	1%	N/A	3%	2%	1%	N/A	4%

N/A-Not Available

Rise in Prescription Drug Misuse and Abuse Impacting Teens

- Prescription drug abuse is the fastest-growing drug problem in the U.S. and impacts teen's mental and physical health. A common misperception is that these drugs are safer to use than other types of drugs. However, there are many short- and long-term health consequences for each type of prescription drug used inappropriately:
    - **Stimulants** have side effects common with cocaine and can include paranoia, high body temperatures, and irregular heartbeat.
    - **Opioids**, which act on the same part of the brain as heroin, can cause drowsiness, nausea, constipation, and slowed breathing.
    - **Depressants** can cause slurred speech, shallow breathing, disorientation, lack of coordination, and even seizures upon withdrawal of chronic use.
- The above impacts are particularly harmful to a developing teen brain and body. Our brains are still developing until our early to mid-twenties. As with any type of mind-altering drug, prescription drug misuse or abuse can affect judgement and inhibition, putting teens at a higher risk for HIV and other sexually transmitted infections, misusing other drugs, and engaging in additional risky behaviors.

(Source: SAMHSA, Rise in Prescription Drug Misuse and Abuse Impacting Teens, updated on 7/22/20)

Youth Health: Perceptions of Substance Use

Key Findings

In 2019, 74% of Lucas County youth thought there was a great risk in harming themselves if they used prescription drugs not prescribed to them. Seventy-eight percent (78%) of youth reported their parents would disapprove of them smoking cigarettes.

Perceived Risk of Substance Use

- Sixty-eight percent (68%) of Lucas County youth thought there was a great risk in harming themselves physically or in other ways if they smoked cigarettes.
- Sixty-eight percent (68%) of youth thought there was a great risk in harming themselves physically or in other ways if they drank alcohol.
- Sixty-two (62%) of youth thought there was a great risk in harming themselves physically or in other ways if they used e-cigarettes/vapes.
- Over half (55%) of youth thought there was great risk in harming themselves physically or in other ways if they smoked marijuana.
- Nearly three-fourths (74%) of youth thought there was a great risk in harming themselves physically or in other ways if they used prescription drugs not prescribed to them.

Degree of Disapproval of Use by Parents

- Seventy-eight percent (78%) of Lucas County youth reported their parents would disapprove of them smoking cigarettes, increasing to 81% of youth under the age of 13.
- Seventy-two percent (72%) of youth reported their parents would disapprove of them drinking alcohol, decreasing to 60% of those ages 17 and older.
- Three-fourths (75%) of youth reported their parents would disapprove of them using e-cigarettes/vapes, decreasing to 69% of those ages 17 and older.
- Seventy-four percent (74%) of youth reported their parents would disapprove of them smoking marijuana, decreasing to 62% of those ages 17 and older.
- Nearly four-fifths (79%) of youth reported their parents would disapprove of them using prescription drugs not prescribed to them.

Degree of Disapproval of Use by Peers

- Sixty-nine percent (69%) of Lucas County youth reported their peers would disapprove of them smoking cigarettes, increasing to 73% of youth under the age of 13.
- Forty-eight percent (48%) of youth reported their peers would disapprove of them drinking alcohol, decreasing to 24% of those ages 17 and older.
- Fifty-three percent (53%) of youth reported their peers would disapprove of them to using e-cigarettes/vapes, decreasing to 33% of those ages 17 and older.
- Nearly half (49%) of youth reported their peers would disapprove of them to smoking marijuana, decreasing to 32% of those ages 17 and older.
- Sixty-eight percent (68%) of youth reported their peers would disapprove of them using prescription drugs not prescribed to them.

Youth Comparisons	Lucas County 2011 (7th-12th)	Lucas County 2013/14 (7th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)
Perceived Degree of Great Disapproval by Parents				
Smoke cigarettes	82%	78%	81%	76%
Use e-cigarettes/vapes	N/A	N/A	76%	73%
Drink alcohol	63%	74%	73%	69%
Use marijuana	83%	79%	78%	69%
Misuse prescription drugs	N/A	83%	81%	78%
Perceived Degree of Great Disapproval by Peers				
Smoke cigarettes	N/A	45%	71%	66%
Use e-cigarettes/vapes	N/A	N/A	63%	44%
Drink alcohol	N/A	40%	53%	37%
Use marijuana	N/A	41%	58%	38%
Misuse prescription drugs	N/A	58%	72%	65%
Perceived Great Risk of Substance Use				
Smoke cigarettes	62%	64%	69%	68%
Use e-cigarettes/vapes	N/A	N/A	52%	60%
Drink alcohol	28%	39%	69%	70%
Use marijuana	43%	28%	57%	48%
Misuse prescription medication	N/A	58%	75%	76%

N/A – Not Available

Lucas County Youth Perceived Risk of Use

Do you believe people risk harming themselves if they:	Total	Male	Female	13 and younger	14-16 years old	17 and older
Smoke cigarettes	68%	66%	70%	70%	69%	63%
Use e-cigarettes/vapes	62%	59%	64%	66%	59%	59%
Drink alcohol	68%	63%	72%	67%	69%	69%
Use marijuana	55%	51%	59%	67%	51%	38%
Misuse prescription drugs	74%	67%	79%	74%	75%	74%

Lucas County Youth Perceived Disapproval by Parents

Parent would disapprove for you to do the following:	Total	Male	Female	13 and younger	14-16 years old	17 and older
Smoke cigarettes	78%	72%	84%	81%	78%	75%
Use e-cigarettes/vapes	75%	70%	79%	78%	74%	69%
Drink alcohol	72%	66%	77%	77%	71%	60%
Use marijuana	74%	69%	78%	81%	72%	62%
Misuse prescription drugs	79%	73%	83%	81%	78%	77%

Lucas County Youth Perceived Disapproval by Peers

Friend would dispppove for you to do the following:	Total	Male	Female	13 and younger	14-16 years old	17 and older
Smoke cigarettes	69%	63%	73%	73%	68%	62%
Use e-cigarettes/vapes	53%	48%	56%	64%	50%	33%
Drink alcohol	48%	47%	49%	63%	44%	24%
Use marijuana	49%	47%	51%	64%	43%	32%
Misuse prescription drugs	68%	62%	72%	73%	66%	60%

Youth Health: Sexual Behavior

Key Findings

Nineteen (19%) of Lucas County youth had sexual intercourse in their lifetime. Eighteen percent (18%) of sexually active youth had four or more sexual partners in their lifetime. Six percent (6%) youth engaged in intercourse without a reliable method of protection, and 30% reported they were unsure if they used a reliable method.

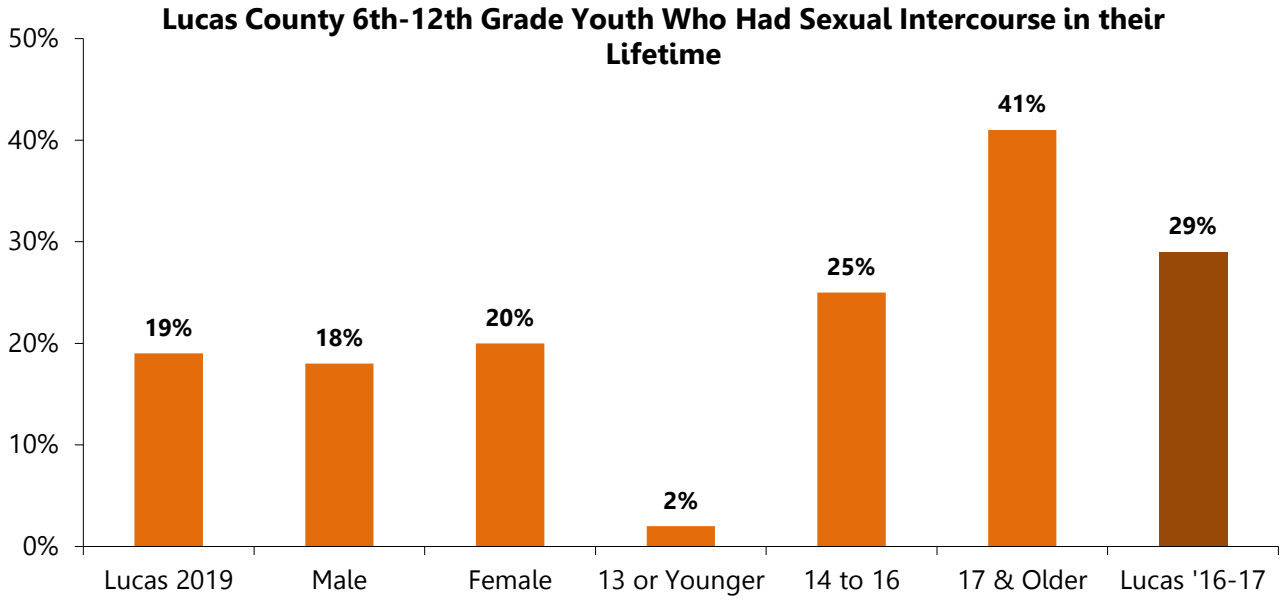
Youth Sexual Behavior

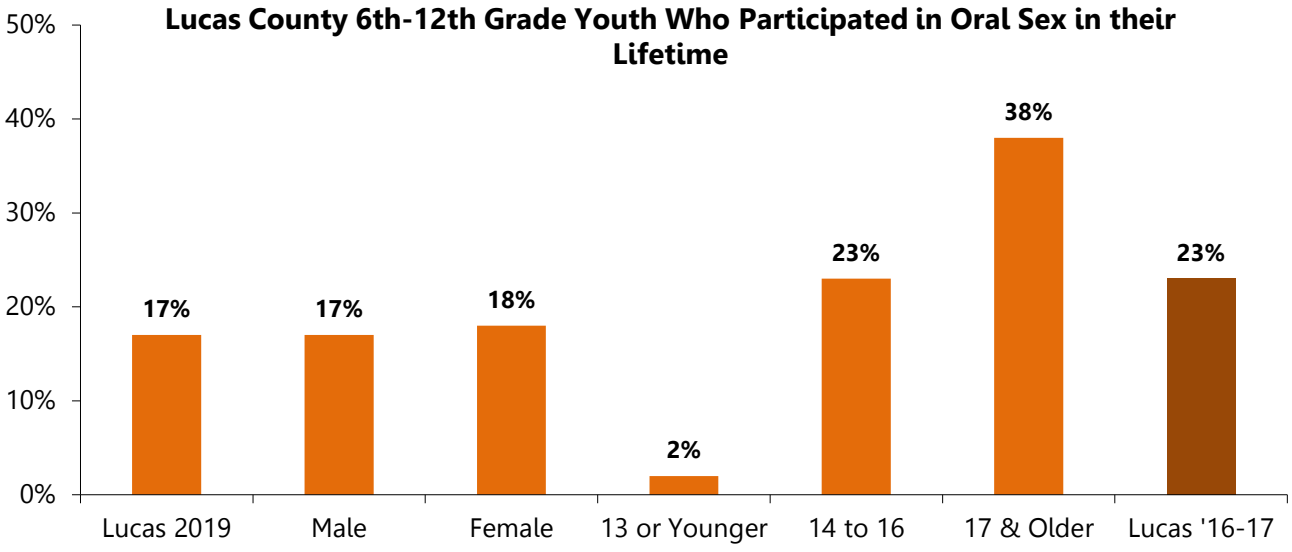
- Nearly one-fifth (19%) of Lucas County youth had sexual intercourse in their lifetime, increasing to 41% of those ages 17 and over.
- About one-fifth (17%) of youth had participated in oral sex, increasing to 38% of those ages 17 and over.
- Three percent (3%) of youth had participated in anal sex, increasing to 9% of those ages 17 and over.
- One-fifth (20%) of youth had participated in sexting, increasing to 36% of those ages 17 and over.
- Twenty-three percent (23%) of youth had viewed pornography, increasing to 37% of those ages 17 and over and 31% of males.

8,208 youth had sexual intercourse in their lifetime.

- Of sexually active youth, 47% had one sexual partner, and 53% had multiple partners in their lifetime.
- Eighteen percent (18%) of sexually active youth had four or more sexual partners in their lifetime.
- Four percent (4%) of all youth had four or more sexual partners in their lifetime.
- Of those youth who were sexually active, 22% had engaged in intercourse by the age of 13. Another 51% had done so by 15 years of age. The average age of onset was 14.6 years old.
- Of all youth, 2% were sexually active before the age of 13.
- Lucas County youth reported they or their partner used the following methods to prevent pregnancy the last time they had sexual intercourse: condoms (31%); birth control pills (10%); an IUD or implant (8%); a shot, patch or birth control ring (5%); withdrawal method (3%); and some other method (4%). Five percent (5%) of youth reported they were gay or lesbian. However, 6% engaged in intercourse without a reliable method of protection, and 30% reported they were unsure.
- Youth reported they or their partner used the following methods to prevent sexually transmitted diseases (STDs) the last time they had sexual intercourse: condoms (47%), they were in a mutually monogamous relationship (18%), they/their partner got tested (8%), avoided alcohol/recreation drug use (3%), abstinence (3%), and some other method (2%).
- Lucas County youth had experienced the following in their lifetime: had sexual contact with a female (13%); had sexual contact with a male (12%); wanted to get pregnant (3%); got someone pregnant (1%); had sex in exchange for something of value such as food, drugs, shelter or money (1%); had a miscarriage (1%); been pregnant (1%); had a child (1%); tried to get pregnant (1%), and had been treated for an STD (<1%);

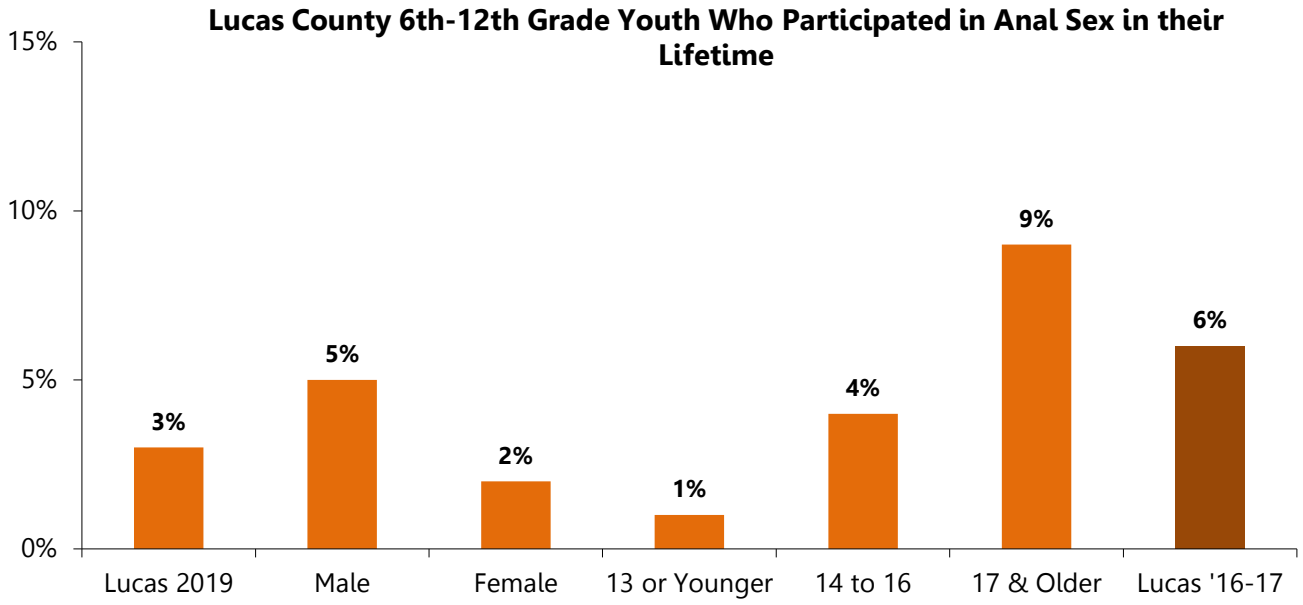
The following graphs show the percentage of Lucas County youth who participated in sexual intercourse and oral sex in their lifetime. An example of how to interpret the information on the first graph includes: 19% of all Lucas County youth had sexual intercourse, including 25% of those 14 to 16 and 41% of those ages 17 and older.

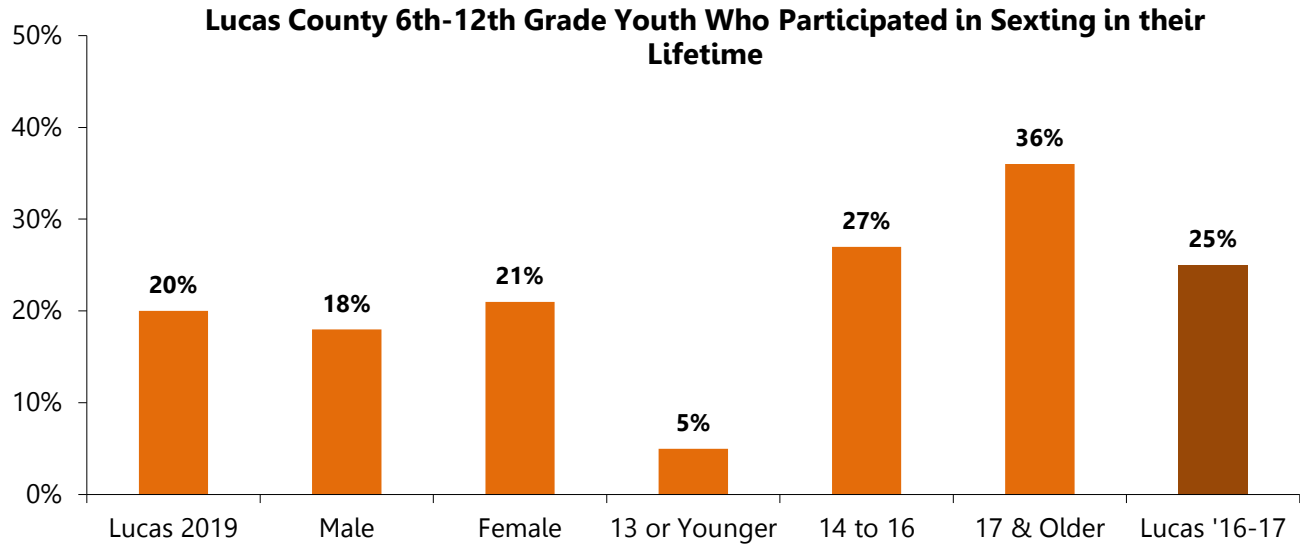




Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show the percentage of Lucas County youth who participated in anal sex and sexting. An example of how to interpret the information on the first graph includes: 3% of all Lucas County youth had anal sex, including 5% of males and 9% of those 17 and older.





Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Ever had sexual intercourse	19%	63%	53%	42%	32%	38%	38%
Participated in anal sex	3%	16%	6%	8%	5%	N/A	N/A
Participated in oral sex	17%	46%	44%	35%	30%	N/A	N/A
Participated in sexting	20%	40%	34%	37%	31%	N/A	N/A
Had viewed pornography	23%	N/A	37%	42%	31%	N/A	N/A
Used a condom (during last sexual intercourse)	31%	75%	68%	58%	24%	45%	54%
Used birth control pills (during last sexual intercourse)	10%	20%	26%	15%	9%	32%	23%
Used an IUD (during last sexual intercourse)	8%	8%	7%	1%	7%	5%	5%
Used a shot, patch or birth control ring (during last sexual intercourse)	5%	8%	7%	3%	5%	N/A	N/A
Did not use any method to prevent pregnancy during last sexual intercourse	6%	7%	10%	13%	5%	12%	12%
Had sexual intercourse with four or more persons (of all youth during their life)	4%	27%	21%	15%	8%	8%	9%
Had sexual intercourse before the age 13 (for the first time of all youth)	2%	12%	10%	7%	2%	3%	3%

N/A – Not Available

Sexual Risk Behavior

- Many young people engage in sexual risk behaviors that can result in unintended health outcomes. For example, among U.S. high school students surveyed in 2017:
  - Less than 10% of sexually experienced students have ever been tested for HIV.
  - 40% had ever had sexual intercourse.
  - 7% had been physically forced to have sexual intercourse when they did not want to.
- Of the 30% of youth who were sexually active in the past three months:
  - 46% did not use a condom the last time they had sex.
  - 14% did not use any method to prevent pregnancy.
  - 19% had drank alcohol or used drugs before last sexual intercourse.
- Sexual risk behaviors place adolescents at risk for HIV infection, other sexually transmitted diseases (STDs), and unintended pregnancy.
- Young people (aged 13-24) accounted for an estimated 21% of all new HIV diagnoses in the United States in 2017.
- Among young people (aged 13-24) diagnosed with HIV in 2017, 87% were males.
- Half of the nearly 20 million new STDs reported each year are among young people, between the ages 15–24.
- Nearly 210,000 babies were born to teen girls aged 15-19 years in 2016.

(Source: CDC, Adolescent and School Health, Sexual Risk Behaviors: HIV, STD, & Teen Pregnancy Prevention, Updated March 25, 2020)

Youth Health: Mental Health

Key Findings

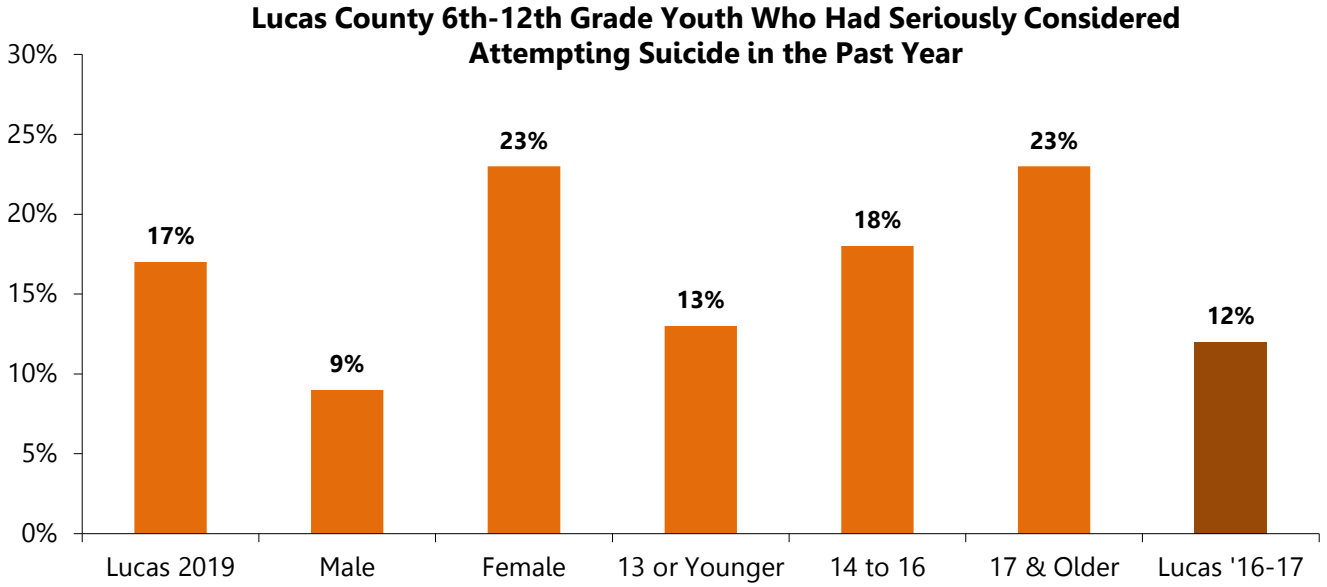
Seventeen percent (17%) of youth had seriously considered attempting suicide in the past year, and 10% attempted suicide in the past year. Over two-fifths (41%) of Lucas County youth reported academic success caused them anxiety, stress, or depression. One-fourth (25%) of youth had experienced three or more adverse childhood experiences (ACEs) in their lifetime.

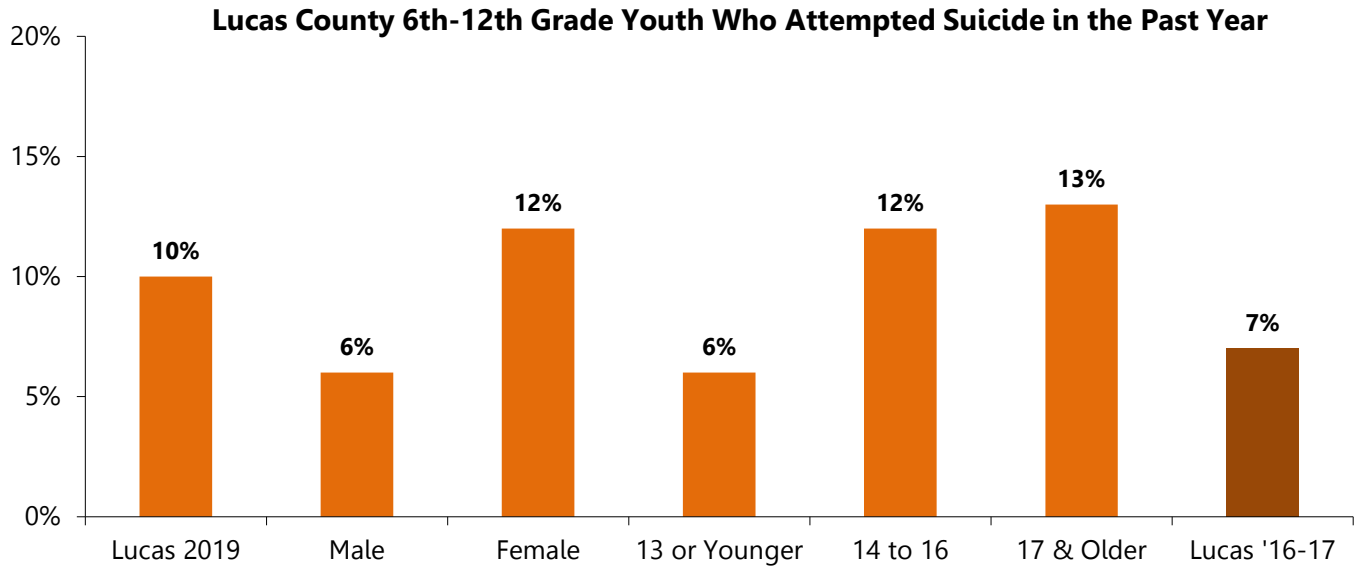
16,415 youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.

Youth Mental Health

- Thirty-eight percent (38%) of Lucas County youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 47% of females.
- Seventeen percent (17%) of youth reported they had seriously considered attempting suicide in the past year, increasing to 23% of females.
- In the past year, 10% of Lucas County youth had attempted suicide, increasing to 12% of females. Seven percent (7%) of youth had made more than one attempt.
- Youth reported the following caused them anxiety, stress or depression: academic success (41%), death of close family member or friend (33%), fighting with friends (30%), self-image (29%), other stress in the home (28%), fighting at home (24%), sports (23%), peer pressure (20%), breakup (20%), dating relationship (20%), being bullied (16%), social media (14%), poverty/no money (14%), parent divorce/separation (11%), sick parent (10%), caring for younger sibling (9%), current news/world events/political environment (9%), alcohol or drug use in the home (5%), not having enough to eat (5%), sexual orientation (3%), not having a place to live (3%), gender identity (2%), and other (14%).
- Youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (50%), texting someone (30%), engaging in hobbies (29%), eating (25%), eat more/less than normal (24%), exercising (20%), talking to someone in their family (19%), talking to a peer (19%), using social media (13%), writing in a journal (12%), shopping (10%), breaking something (10%), praying/reading the Bible (7%), and drinking alcohol/smoke/use tobacco/use illegal drugs (6%). Nineteen percent (19%) of youth reported they did not have anxiety, stress, or depression.
- Youth reported the following adverse childhood experiences (ACEs):
  - Parents became separated or were divorced (30%)
  - Parents or adults in home swore at them, insulted them or put them down (23%)
  - Family did not look out for each other, feel close to each other, or support each other (19%)
  - Parents were not married (17%)
  - Lived with someone who was depressed, mentally ill or suicidal (17%)
  - Lived with someone who was a problem drinker or alcoholic (15%)
  - Lived with someone who served time or was sentenced to serve in prison or jail (14%)
  - Lived with someone who used illegal drugs or misused prescription drugs (9%)
  - Parents or adults in home slapped, hit, kicked, punched or beat each other up (8%)
  - Parents or adults in the home hit, beat, kicked, or physically hurt them in any way (not including spanking) (6%)
  - Did not have enough to eat, had to wear dirty clothes, and had no one to protect them (4%)
  - An adult or someone five years older than them touched them sexually (3%)
  - An adult or someone five years older than them made them touch them sexually (2%)
  - An adult or someone five years older than them forced them to have sex (1%)
- One-fourth (25%) of youth had experienced three or more ACEs in their lifetime, increasing to 33% of females.

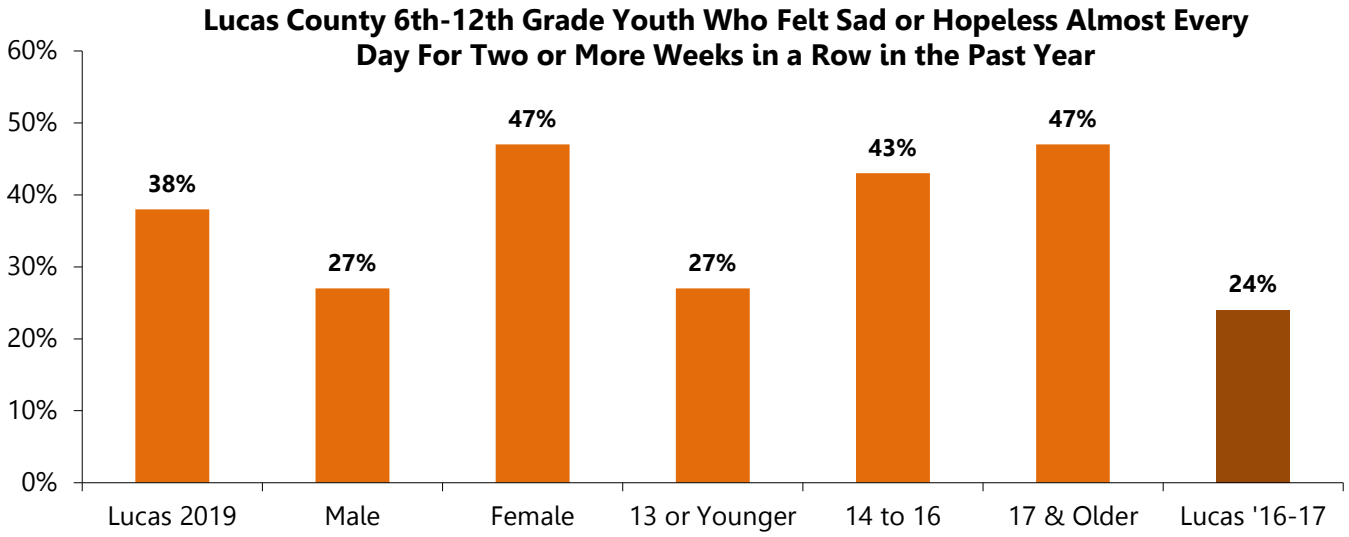
The following graphs show Lucas County youth who had seriously considered attempting suicide and had attempted suicide in the past year. An example of how to interpret the information in the first graph includes: 17% of youth seriously considered attempting suicide in the past year, including 9% of males and 23% of females.





Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows Lucas County youth who felt sad or hopeless almost every day for two weeks or more in a row in the past year. An example of how to interpret the information includes: 38% of youth felt sad or hopeless almost every day for two weeks or more in a row, including 27% of males, and 47% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between those who contemplated suicide in the past year and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 70% of those who contemplated suicide had been bullied in the past year, compared to 26% of those who did not contemplate suicide.

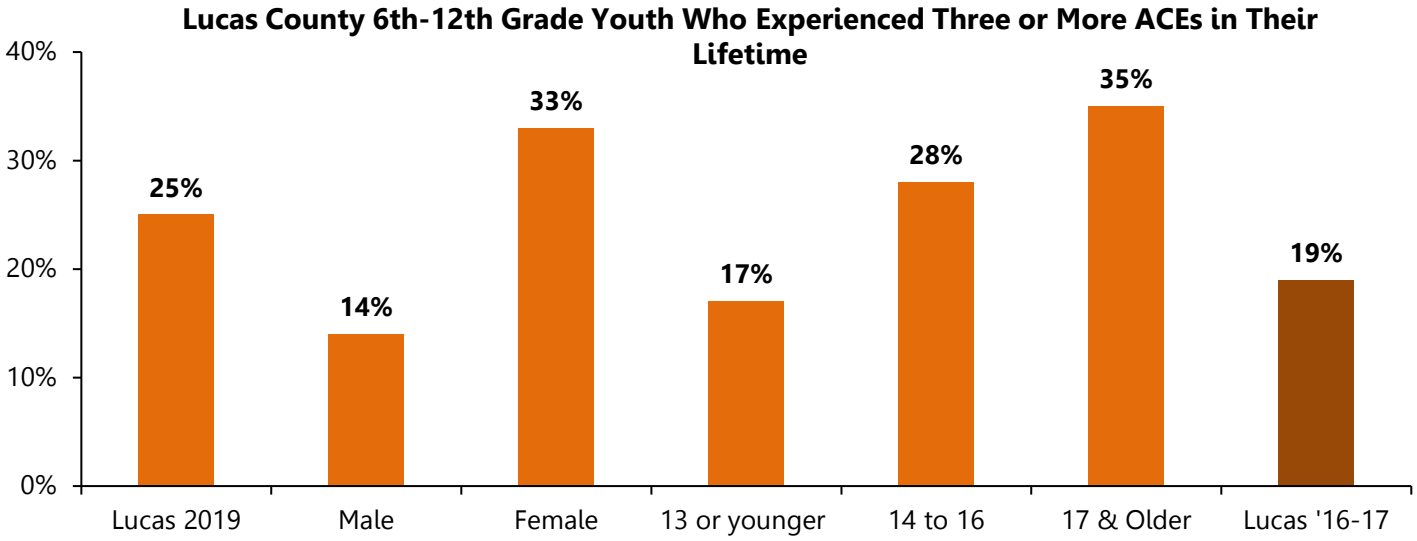
Behaviors of Lucas County Youth

Contemplated Suicide vs. Did Not Contemplate Suicide

Youth Behaviors	Contemplated Suicide	Did Not Contemplate Suicide
Bullied (in the past year)	70%	26%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	60%	18%
Had sexual intercourse in their lifetime	34%	16%
Used marijuana (in the past month)	28%	8%
Had at least one drink of alcohol (in the past month)	25%	10%
Smoked cigarettes (in the past month)	7%	2%

"Contemplated suicide" indicates youth who self-reported seriously considering attempting suicide in the past year.
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the percentage of Lucas County youth who had experienced three or more adverse child experiences (ACEs) in their lifetime. An example of how to interpret the information includes: 25% of all Lucas County youth had experienced three or more ACEs in their lifetime, including 33% of females and 35% of those 17 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between those who experienced three or more ACEs, as well as other activities and experiences. An example of how to interpret the information includes: 67% of those who experienced three or more ACEs in their lifetime felt sad or hopeless almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year, compared to 21% of those who did not experience any ACEs.

Behaviors of Lucas County Youth

Experienced three or More ACEs vs. Did Not Experience Any ACEs

Youth Behaviors	Experienced Three or More ACEs	Did Not Experience Any ACEs
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	67%	21%
Bullied (in the past year)	59%	19%
Seriously considered attempting suicide (in the past year)	41%	6%
Had sexual intercourse (in their lifetime)	34%	10%
Have had at least one drink of alcohol (in the past month)	25%	7%
Attempted suicide (in the past year)	25%	3%
Have used marijuana (in the past month)	23%	6%
Misused medications (in their lifetime)	14%	3%
Smoked cigarettes (in the past month)	5%	2%

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S 2019 (9th-12th)
Seriously considered attempting suicide (in the past year)	17%	16%	18%	14%	19%	16%	19%
Attempted suicide (in past year)	10%	4%	8%	8%	11%	7%	9%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past 12 months)	38%	24%	29%	29%	45%	33%	37%

Youth Depression: Signs and Symptoms

- Occasionally being sad or feeling hopeless is a part of every child's life. However, some children feel sad or uninterested in things that they used to enjoy or feel helpless or hopeless in situations where they could do something to address the situations. When children feel persistent sadness and hopelessness, they may be diagnosed with depression.
- Examples of behaviors often seen when children are depressed include
  - Feeling sad, hopeless, or irritable a lot of the time
  - Not wanting to do or enjoy doing fun things
  - Changes in eating patterns – eating a lot more or a lot less than usual
  - Changes in sleep patterns – sleeping a lot more or a lot less than normal
  - Changes in energy – being tired and sluggish or tense and restless a lot of the time
  - Having a hard time paying attention
  - Feeling worthless, useless, or guilty
  - Self-injury and self-destructive behavior
- Extreme depression can lead a child to think about suicide or plan for suicide. For youth ages 10-24 years, suicide is the leading form of death.
- Some children may not talk about helpless and hopeless thoughts, and they may not appear sad. Depression might also cause a child to make trouble or act unmotivated, so others might not notice that the child is depressed or may incorrectly label the child as a trouble-maker or lazy.

(Source: CDC, Children's Mental Health: Anxiety and Depression, March 20, 2020)

Youth Health: Social Determinants of Health

Key Findings

Seventy percent (70%) of Lucas County youth had been to the dentist in the past year. Twelve percent (12%) of youth drivers had texted while driving in the past month. Forty-five percent (45%) of youth who had a social media or online gaming account believed that sharing information online is dangerous.

Personal Health

- Youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work at the following frequencies: less than a year ago (70%), one to two years ago (11%), more than two years ago (4%), never (2%), and do not know (13%).
- Lucas County youth had been told by a doctor or nurse that had ever had asthma (21%), high blood pressure (5%), and diabetes (<1%).
- Lucas County youth reported they got the following amounts of sleep on an average school night: four hours or less (7%), five hours (12%), six hours (22%), seven hours (23%), eight hours (21%), nine hours (11%) and ten hours or more (4%).
- During the past year, youth felt their experience with health care workers was better than people of other races (3%), worse than people of other races (2%), worse than people of some races, better than others (2%), and only encountered people of the same race (1%). Three percent (3%) of youth did not get health care in the past year.

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	70%	79%	77%	76%	68%	78%	76%
Diagnosed with asthma	21%	N/A	N/A	24%	24%	24%	22%

N/A – Not Available

Personal Safety

- Eighty-nine percent (89%) of Lucas County youth had a social media or online gaming account. Of those who had an account, they reported the following:
  - They knew all the people in their "friends" (35%)
  - Their account was currently checked private (34%)
  - They knew all of the people they play online (26%)
  - Their parents had their password (19%)
  - Their friends had their passwords to some or all of their accounts (11%)
  - They had been asked to meet someone they met online (8%)
  - They were bullied because of their accounts (4%)
  - They share personal information such as where they live (4%)
  - Their parents do not know they have an account (3%)
  - They had participated in sexual activity with someone they met online (3%)

- Forty-five percent (45%) of youth who had a social media or online gaming account believed that sharing information online is dangerous.
- Lucas County youth reported being unsupervised on an average school day: less than one hour (19%), one to two hours (25%), three to four hours (15%), more than four hours (13%), and overnight (6%). Twenty-two percent (22%) of youth reported they spent no time unsupervised on an average school day.
- More than two-fifths (41%) of youth hit their head hard enough that they were dizzy, had a concussion, were knocked out, or had their "bell rung" in their lifetime, increasing to 47% of males.
- In the past month, youth drivers did the following while driving: wore a seatbelt (57%), ate (27%), talked on their cell phone (17%), drove while tired or fatigued (15%), used their cell phone other than for talking or texting (13%), texted (12%), read (2%), used marijuana (1%), applied makeup (1%), used illegal drugs (1%), and drank alcohol (1%).

Education

- Lucas County youth reported the following plans for their future: attend a four-year college (63%), follow their career path/seek employment (56%), attend a community college or technical/trade school (23%), and join the military (9%). Five percent (5%) of youth reported no hope for their future. One percent (1%) of youth will not finish high school.
- Youth reported the following regarding school: they get bored at school (67%), their teachers care about them (60%), their teachers push them to do their best (59%), they get a lot of encouragement (43%), they feel protected at school (38%), adults do not take bullying seriously at school (16%), they skipped school in the past month (12%), they do not go to class unprepared (11%), teachers and/or staff do not care about them (9%), and teachers and/or staff bully them (6%).

Neighborhood and Built Environment

- Youth reported living with both parents (45%), mother only (25%), mother and step-parent (12%), grandparents (8%), father only (7%), joint custody parents (6%), another relative (5%), father and step-parent (4%), mother and her partner (3%), on their own or with friends (1%), father and his partner (1%), and guardians/foster parents (1%).
- Youth reported the following issues in their household: temperature regulation (e.g., too hot/too cold) (6%), insects (4%), plumbing problems (4%), odors (4%), rodents (2%), mold (2%), and bed bugs/lice (1%).
- During the past year, youth reported an adult discussed the following topics with them:
  - Goals for the future (73%)
  - Respecting themselves (50%)
  - Dating and healthy relationships (48%)
  - Healthy ways to deal with stress and depression (44%)
  - Condoms/safer sex/STD prevention (30%)
  - Body image (26%)
  - Abstinence and how to refuse sex (22%)
  - Birth control options (20%)
  - None of the above topics (19%)

Social and Community Context

- Ten percent (10%) of youth reported gambling in their lifetime. Youth gamblers experienced the following: gambled with larger amounts of money to get the same excitement (15%), gambled while drunk or high (11%), lied to a family member or others to hide their gambling (8%), and someone expressed concern about their gambling habits (6%). Sixty-five percent (65%) of youth did not experience any gambling issues.

- In the past month, youth reported feeling emotionally upset (e.g., angry, sad, or frustrated) based on how they were treated due to their skin color (7%), sexual orientation (5%), ethnicity (4%), gender identity (4%), culture (3%), religion (2%), and disability (2%).

- Eighty-two percent (82%) of youth participated in extracurricular activities. They participated in the following:
  - A sports or intramural program (50%)
  - School club or social organization (38%)
  - Exercising outside of school (36%)
  - Caring for siblings after school (27%)
  - Part-time job (24%)
  - Babysitting for other kids (19%)
  - Volunteering in the community (15%)
  - Church youth group (13%)
  - Church or religious organization (11%)
  - Caring for parents or grandparents (4%)
  - Some other organized activity (scouts, 4-H, etc.) (4%)

Youth Health: Violence

Key Findings

Two percent (2%) of Lucas County youth carried a weapon (such as a gun, knife or club) on school property in the past month. Thirty percent (30%) of youth had been involved in a physical fight in the past year. One-third (33%) of youth had been bullied in the past year.

12,959 Lucas County youth had been bullied in the past year.

Violence-Related Behaviors

- Two percent (2%) of Lucas County youth carried a weapon on school property (such as a gun, knife or club) in the past month.
- Eight percent (8%) of youth were threatened or injured with a weapon on school property in the past year.
- Youth did not go to school during the past month for the following reasons: felt unsafe at school (8%) and felt unsafe on the way to or from school (3%).

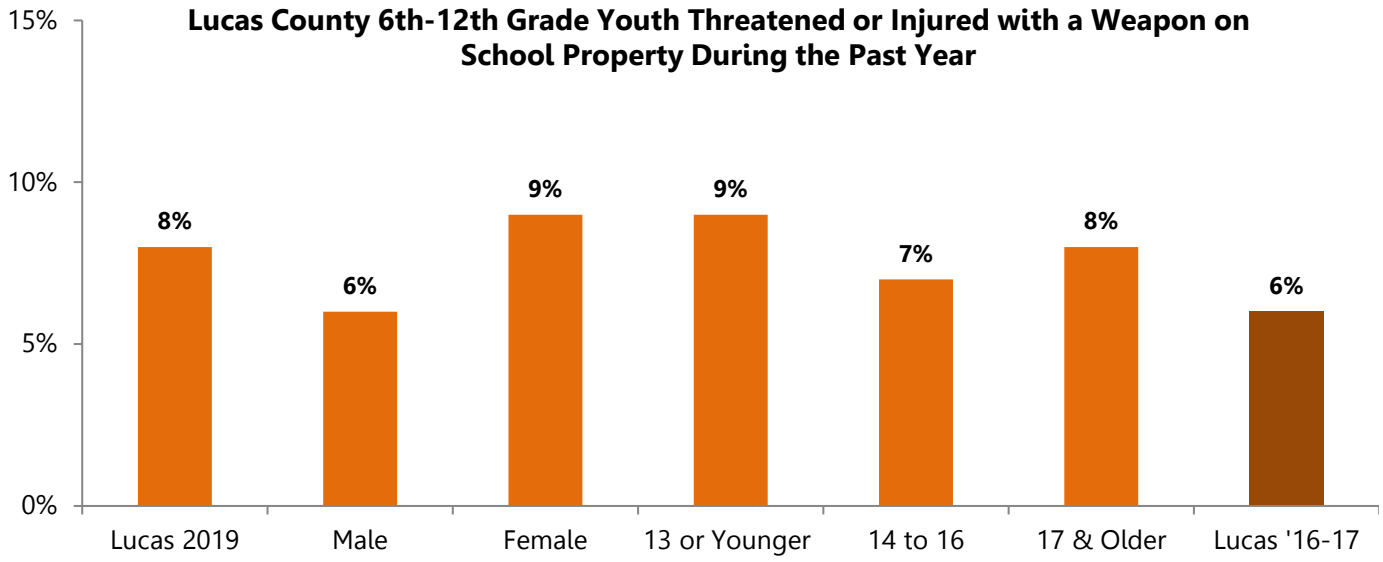
Physical and Sexual Violence

- In the past year, 30% of youth had been involved in a physical fight, increasing to 34% of males.
- Of those who had been in a physical fight, 50% had been in a fight on more than one occasion.
- In the past year, 9% of youth reported an adult or caregiver hit, slapped, or physically hurt them on purpose.
- In the past year, youth reported someone they were dating or going out with did the following: forced or pressured them to do sexual things that they did not want to (6%), physically hurt them on purpose (4%), and stalked them (4%).
- Lucas County youth had been forced to engage in the following: touched in an unsafe (sexual) way (6%), other sexual activity (2%), sexual intercourse (1%), and oral sex (1%).
- Thirty-five percent (35%) of youth purposefully hurt themselves in their lifetime by cutting, scratching, burning, hitting or biting, increasing to 40% of females.

Bullying

- One-third (33%) of Lucas County youth had been bullied in the past year. The following types of bullying were reported:
  - 23% were verbally bullied (teased, taunted or called harmful names)
  - 19% were indirectly bullied (spread mean rumors about them or kept them out of a "group")
  - 9% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
  - 7% were physically bullied (were hit, kicked, punched or people took their belongings)
  - 2% were sexually bullied (used nude or semi-nude pictures to pressure someone to have sex that did not want to, blackmail, intimidate, or exploit another person)
- In the past year, 20% of youth had been bullied on school property.
- In the past year, youth reported they had been a victim of teasing or name calling due to the following: weight, size or physical appearance (24%); sexual orientation (10%); race or ethnic background (6%); religious affiliation (2%); gender (2%); and disability (1%).

The following graph shows Lucas County youth who were threatened or injured with a weapon on school property in the past year. Examples of how to interpret the information shown on the graph include: 8% of all youth had been threatened or injured with a weapon on school property in the past year, including 6% of males and 9% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Types of Bullying Lucas County Youth Experienced in Past Year

Youth Behaviors	Total	Males	Females	13 and younger	14-16 Years old	17 and older
Verbally Bullied	23%	17%	28%	23%	25%	20%
Indirectly Bullied	19%	10%	28%	17%	20%	24%
Cyber Bullied	9%	4%	12%	7%	10%	11%
Physically Bullied	7%	8%	5%	8%	8%	3%
Sexually Bullied	2%	1%	3%	1%	3%	1%

Healthy People 2020

Injury and Violence Prevention (IVP)

Objective	Lucas County 2019	U.S. 2017	Healthy People 2020 Target
IVP-34 Fighting among adolescents	30% (6-12 Grade) 26% (9-12 Grade)	23% (9-12 Grade)	28% (9-12 Grade)
IVP-35 Reduce bullying among adolescents on school property	20% (6-12 Grade) 17% (9-12 Grade)	19% (9-12 Grade)	20% (9-12 Grade)

Note: The Healthy People 2020 target is for youth in grades 9-12.
(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019/2020 Lucas County Health Assessment)

The table below indicates correlations between those who were bullied in the past year and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 58% of those who were bullied felt sad or hopeless almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year, compared to 28% of those who were not bullied.

Behaviors of Lucas County Youth

Bullied vs. Non-Bullied

Youth Behavior	Bullied	Non-Bullied
Currently participate in extracurricular activities	86%	81%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	58%	28%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	44%	15%
Seriously considered attempting suicide (in the past year)	35%	8%
Classified as overweight or obese by body mass index (BMI)	33%	29%
Had sexual intercourse (in their lifetime)	27%	15%
Attempted suicide (in the past year)	20%	5%
Had at least one drink of alcohol (in the past month)	18%	10%
Used marijuana (in the past month)	17%	9%
Misused prescription medication (in the past month)	11%	8%
Carried a weapon on school property (in the past month)	4%	1%
Smoked cigarettes (in the past month)	4%	2%

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Lucas County 2019 (6th-12th)	Lucas County 2011 (9th-12th)	Lucas County 2013/14 (9th-12th)	Lucas County 2016/17 (9th-12th)	Lucas County 2019 (9th-12th)	Ohio 2019 (9th-12th)	U.S. 2019 (9th-12th)
Were in a physical fight (in past year)	30%	28%	25%	23%	26%	19%	22%
Carried a weapon on school property (in the past month)	2%	N/A	9%	N/A	2%	N/A	3%
Threatened or injured with a weapon on school property (in past year)	8%	N/A	7%	7%	8%	N/A	7%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	11%	6%	6%	4%	17%	N/A	9%
Electronically bullied (in past year)	9%	15%	12%	12%	11%	13%	16%
Bullied (in past year)	33%	43%	38%	35%	33%	N/A	N/A
Bullied on school property (in past year)	20%	N/A	22%	17%	17%	14%	20%
Ever purposefully hurt themselves	35%	23%	10%	N/A	31%	N/A	N/A

N/A – Not Available

Child Health: Health and Functional Status

Key Findings

In 2020, 16% of children were classified as obese by body mass index (BMI) calculations. More than four-fifths (82%) of Lucas County parents had taken their child to the dentist in the past year. Ten percent (10%) of Lucas County parents reported their child had been diagnosed with asthma. Fourteen percent (14%) of parents reported their child had been diagnosed with ADD/ADHD.

2017/18 National Survey of Children's Health

- Four percent (4%) of Ohio children ages 0-5 were diagnosed with asthma, increasing to 13% of 6-11 year olds.
- Fourteen percent (14%) of Ohio children ages 6-11 were diagnosed with ADD/ADHD.

(Source: National Survey of Children's Health, 2017/18)

General Health Status of Children Ages 0-11

- In 2020, 97% of Lucas County parents rated their child's health as excellent or very good. Three percent (3%) of parents rated their child's health as fair, and no parents (0%) rated their child's health as poor.

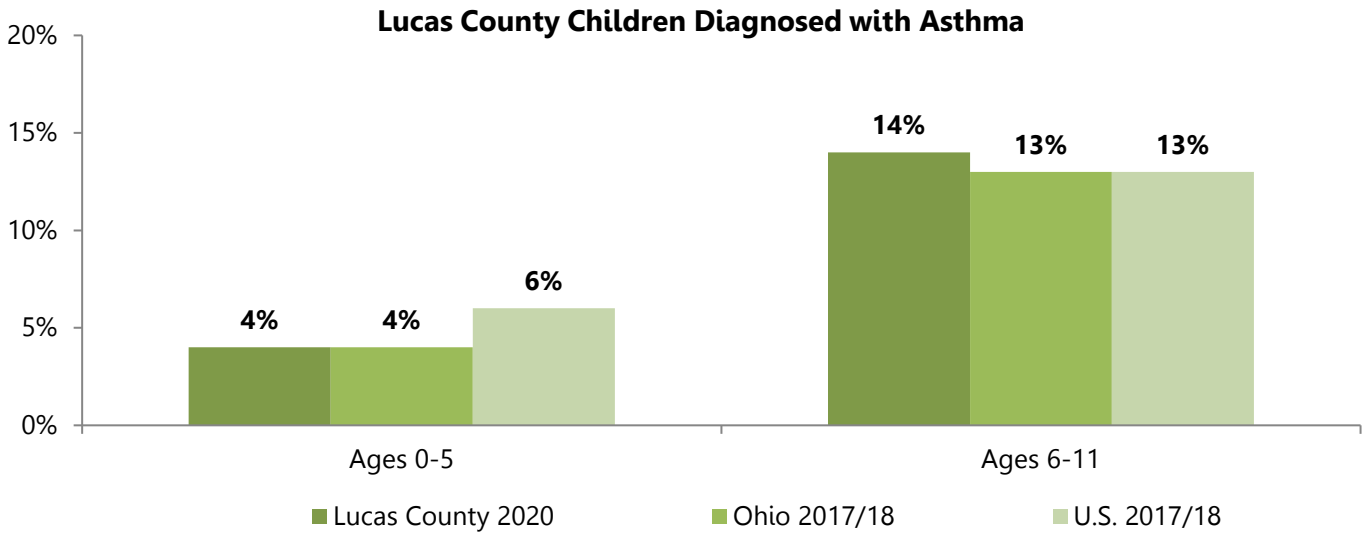
Health Conditions of Children Ages 0-11

- A doctor, health professional, or health educator told Lucas County parents their child had the following conditions:
  - ADD/ADHD (14%)
  - Speech and language delay (14%)
  - Anxiety problems (11%)
  - Asthma (10%)
  - Behavioral/conduct problems (7%)
  - Depression (5%)
  - Learning disability (5%)
  - Obsessive-compulsive disorder (OCD) (3%)
  - Autism/autism spectrum disorder (ASD) (3%)
  - Cerebral palsy (2%)
  - Fetal alcohol syndrome (2%)
  - Diabetes (1%)
  - Overweight/obese (1%)
  - Genetic or inherited condition (1%)
  - Intellectual disability/mental retardation (1%)
  - Epilepsy/seizure disorder (<1%)
  - Neonatal abstinence syndrome (<1%)
- Thirty-eight percent (38%) of Lucas County parents reported their child had at least one health condition.
- Seven percent (7%) of parents reported their child ages 0-11 had an episode of asthma or had an asthma attack in the past year, increasing to 12% of those with incomes less than $25,000.
- Of parents who reported their child ages 0-11 had been diagnosed with autism/ASD or developmental delay, 29% reported their child has received therapy services to meet his/her developmental needs, such as early intervention, occupational therapy, or behavioral therapy.
- Parents reported their child had the following allergies: environmental allergies (16%), animal allergies (7%), milk (5%), other food allergies (3%), eggs (2%), soy (1%), peanuts (1%), red dye (1%), wheat (<1%), and other allergies (4%). Of those with allergies, 2% had an EpiPen.
- More than two-fifths (41%) of parents reported their child had been tested for lead poisoning, and the results were within normal limits. Less than one percent (<1%) reported the levels were elevated, and medical follow-up was needed. Nearly half (46%) of parents had not had their child tested for lead poisoning, and 14% of parents did not know if their child had been tested for lead.

Asthma

The following graph shows the percentage of children who were diagnosed with asthma in Lucas County, Ohio, and the U.S.

- Lucas County had a higher percentage of children ages 6-11 who were diagnosed with asthma compared to both Ohio and the U.S.



(Sources: National Survey of Children's Health & 2020 Lucas County Health Assessment)

Weight Status and Nutrition of Children Ages 0-11

- Sixteen percent (16%) of children were classified as obese by (BMI) calculations. Nine percent (9%) of children were classified as overweight, 62% were normal weight, and 13% were underweight.
- On an average day of the week, Lucas County parents reported their child spent 1.7 hours watching TV, 1.4 hours reading, 0.8 hours playing video games, 0.6 hours on a cell phone, and 0.6 hours on a PC/tablet.
- Thirty percent (30%) of Lucas County children ate 5 or more servings of fruits and/or vegetables per day, 47% of children ate 3-4 servings, and 22% of children ate 1-2 servings. One percent (1%) of children ate 0 servings of fruits and/or vegetables per day.

The table below indicates the number of servings Lucas County children had of fruit, vegetables, sugar-sweetened beverages and caffeinated beverages per day.

	5 or more servings	3-4 servings	1-2 servings	0 servings
Fruits	2%	28%	68%	2%
Vegetables	1%	18%	76%	5%
Sugar-sweetened beverages	1%	4%	52%	43%
Caffeinated beverages	0%	1%	9%	90%

Oral Health of Children Ages 0-11

- Eighty-two percent (82%) of parents reported their child had been to the dentist in the past year, decreasing to 67% of those with incomes less than $25,000.

- Parents indicated their child did not get all the dental care they needed for the following reasons: child was not old enough to go/dentist would not see child yet because of their age (9%), costs too much (4%), treatment is ongoing (3%), no insurance (1%), dissatisfaction with Medicaid dentist (1%), could not find a dentist who accepted child's insurance (1%), not available in area/transportation problems (1%), inconvenient times/could not get an appointment (1%), did not know where to go for treatment (<1%), dissatisfaction with staff (<1%), child refuses to go (<1%), missed an appointment and not allowed to go back to clinic (<1%), and other reasons (3%).

Child 0-5 Comparisons	Lucas County 2014 Ages 0-5	Lucas County 2017 Ages 0-5	Lucas County 2020 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Rated health as excellent or very good	91%	98%	99%	92%	93%
Dental care visit (in past year)	64%	61%	64%	52%**	62%**
Diagnosed with asthma	11%	5%	4%	4%	6%
Diagnosed with ADHD/ADD	1%	0%	1%	1%*	2%*
Diagnosed with behavioral or conduct problems	3%	0%	4%	3%*	5%*
Diagnosed with depression	1%	0%	4%	0%*	<1%*
Diagnosed with epilepsy	0%	0%	0%	N/A	1%
Diagnosed with a head injury	1%	0%	0%	N/A	N/A
Diagnosed with anxiety problems	2%	0%	3%	1%*	2%*
Diagnosed with developmental delay	N/A	3%	0%	10%*	8%*
Diagnosed with learning disability	3%	0%	0%	1%*	2%*
Diagnosed with speech or language disorder	15%	10%	10%	6%*	11%*
Two or more health conditions	N/A	N/A	6%	5%	7%

N/A – Not available
***Ages 1-5*
**Ages 3-5*

Child 6-11 Comparisons	Lucas County 2014 Ages 6-11	Lucas County 2017 Ages 6-11	Lucas County 2020 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Rated health as excellent or very good	86%	97%	95%	89%	90%
Dental care visit (in past year)	91%	94%	92%	93%	92%
Diagnosed with asthma	17%	15%	14%	13%	13%
Diagnosed with ADHD/ADD	14%	12%	22%	14%	10%
Diagnosed with behavioral or conduct problems	5%	9%	9%	13%	10%
Diagnosed with depression	2%	2%	6%	1%	2%
Diagnosed with epilepsy	2%	1%	1%	N/A	1%
Diagnosed with a head injury	2%	1%	0%	N/A	N/A
Diagnosed with anxiety problems	6%	10%	15%	9%	9%
Diagnosed with developmental delay	N/A	10%	0%	8%	8%
Diagnosed with learning disability	5%	6%	8%	11%	9%
Diagnosed with speech or language disorder	9%	11%	16%	10%	10%
Two or more health conditions	N/A	N/A	22%	23%	21%

N/A – Not Available

Children's Mental Health

- **What are mental health disorders?**
  - Mental health disorders among children are described as serious changes in the way children usually learn behave, or handle their emotions, which cause distress and problems getting through the day.
- **What are the symptoms of mental disorders?**
  - Symptoms may change over time as a child grows and may include difficulties with the way children play, learn, speak, and act or how the child handles their emotions. Diagnosis often occurs in the school years, however, some children with a disorder may not be recognized or diagnosed as having one.
- **How are mental health disorders treated?**
  - Childhood mental health disorders can be treated and managed. There are many treatment options based on the most current medical evidence and doctors should work closely with everyone involved in the child's treatment (teachers, coaches, therapists, family members, etc.)
  - Early diagnosis and appropriate treatment can make a huge difference in the lives of children with mental health disorders.

(Source: Centers for Disease Control and Prevention, Children's Mental Health, Updated March 30, 2020)

Child Health: Health Care Access

Key Findings

In 2020, 1% of Lucas County parents reported their child did not currently have health insurance. Thirteen percent (13%) of parents reported their child did not get all of the prescription medications they needed in the past year. Ninety-six percent (96%) of parents had taken their child to the doctor for preventive care in the past year.

2017/18 National Survey of Children's Health

- Thirty-two percent (32%) of Ohio 0-5-year-olds and 25% of Ohio 6-11-year-olds had public insurance.
- Seventy-two percent (72%) of Ohio 0-5-year-olds and 77% of Ohio 6-11-year-olds had a personal doctor or nurse.

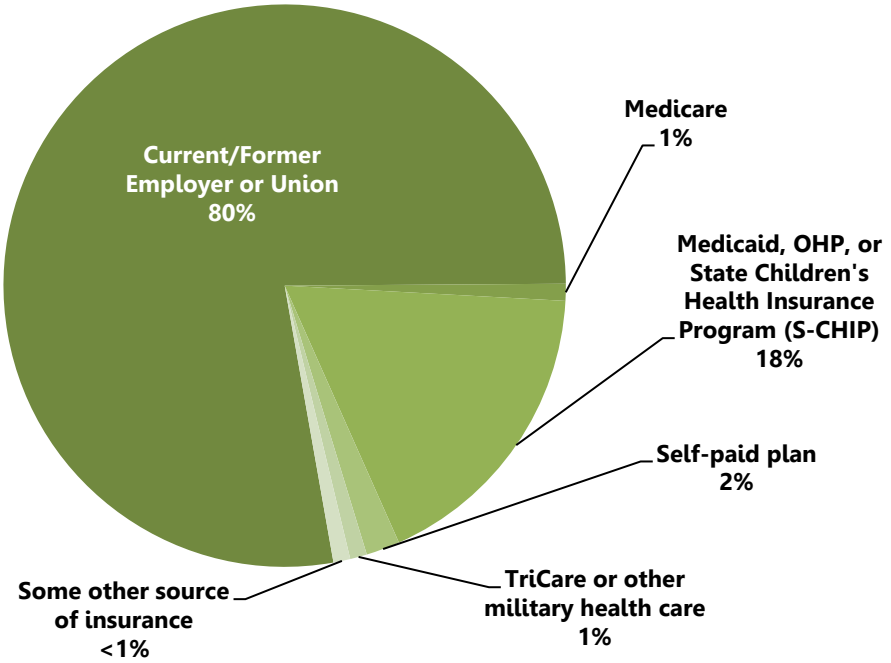
(Source: National Survey of Children's Health, 2017/18)

Health Insurance of Children Ages 0-11

- One percent (1%) of parents reported their child did not currently have health insurance.
- Lucas County parents reported their child was covered by the following types of health insurance: parent's employer (80%); Medicaid, Buckeye, Paramount, Molina, United, Care Source, or State Children's Health Insurance Program (S-CHIP) (18%); purchased directly from an insurance company (2%); Insurance Marketplace (1%); TRICARE or other military health care (1%); Medicare (1%); and some other source of insurance (<1%).
- Parents reported their child's health insurance covered the following: doctor visits (99%); well visits (98%); immunizations (98%); prescription coverage (97%); hospital stays (96%); dental (93%); vision (86%); mental health (83%); and therapies (speech, occupational therapy, physical therapy, etc.) (77%).
- Twelve percent (12%) of Lucas County families had problems paying for their child's medical or health care bills within the past year.

The following pie chart shows the sources of Lucas County children's health care coverage.

Source of Health Coverage for Lucas County Children



Medical Home of Children Ages 0-11

- Eighty-four percent (84%) of parents reported they had one or more people they think of as their child's personal doctor or nurse, decreasing to 70% of those with incomes less than $25,000.
- Ninety-six percent (96%) of parents reported their child had visited their health care provider for preventive care in the past year, increasing to 100% of 0-5 year olds.
- Lucas County parents reported that their child went to the following places when they were sick or needed advice about their health: a private doctor's office (85%); multiple places, including a doctor's office (6%); an urgent care center (5%); hospital emergency room (2%); a community health center (1%); mental health provider (<1%); in store health clinic (<1%); and family and friends (<1%).

Types of Specialists (% of all parents who looked for a specialist)	Lucas County parents who looked, but were unable to find a specialist for their child	Lucas County parents who looked and went to a specialist for their child
Neurologist (29% of all parents looked)	1%	99%
Dermatologist (skin) doctor (24% of all parents looked)	1%	99%
Ear, nose and throat doctor (15% of all parents looked)	2%	98%
Pulmonologist (lung) doctor (10% of all parents looked)	7%	93%
Ophthalmologist (eye) doctor (10% of all parents looked)	11%	89%
Oncologist/cancer doctor (9% of all parents looked)	8%	92%
Allergist (8% of all parents looked)	0%	100%
Psychiatrist/mental health provider (5% of all parents looked)	13%	87%
Heart doctor (5% of all parents looked)	8%	92%
Other specialist (4% of all parents looked)	17%	83%
Endocrinologist (1% of all parents looked)	0%	100%
Developmental pediatrician (1% of all parents looked)	0%	100%

Access and Utilization of Children Ages 0-11

- Eleven percent (11%) of parents reported the following prevented their child from getting all of the medical care they needed in the past year: cost too much (31%), treatment is ongoing (16%), too long of a wait for an appointment (13%), no convenient times/could not get appointment (13%), no insurance (13%), dissatisfaction with doctor (6%), missed an appointment and not allowed to go back to the clinic (6%), unreliable/lack of child care (6%), not available in area/transportation problems (6%), no referral (6%), did not know where to go for treatment (3%), health plan problem (3%), doctor did not know how to treat or provide care (3%), dissatisfaction with office staff (3%), and could not find a doctor who accepted child's insurance (3%). Eighty-nine percent (89%) of Lucas County parents reported their child received all the medical care they needed in the past year.

- Thirteen percent (13%) of parents reported the following prevented their child from getting all their prescription medications filled in the past year: costs too much (11%), not available in area/transportation problems (5%), treatment is ongoing (5%), did not think their child needed it (3%), health plan problem (3%), no insurance (3%), did not know where to go to fill prescriptions (3%), and other reasons (11%). Eighty-seven percent (87%) of parents reported their child received all of their prescription medications in the past year.

- Fifty-five percent (55%) of parents reported the following prevented their child from getting all of the mental health care they needed in the past year: cost too much (6%), no convenient times/could not get appointment (3%), too long of a wait for an appointment (3%), could not find a doctor who accepted child's insurance (2%), not available in area/transportation problems (1%), did not know where to go for treatment (1%), dissatisfaction with doctor/office staff (1%), no insurance (1%), missed appointment and not allowed back at clinic (1%), no referral (1%), and other reasons (2%). Forty-five percent (45%) of Lucas County parents reported their child received all the mental health care they needed in the past year.

- Parents reported their child needed the following special services in the past year:
  - Counseling (11%)
  - Speech therapy (9%)
  - Psychiatry (5%)
  - Occupational therapy (4%)
  - Medical equipment (3%)
  - Early intervention/special education (3%)
  - Physical therapy (2%)
  - Home health nursing (<1%)
  - Other (5%)

- Over half (56%) of Lucas County parents reported their child ages 0-11 years old had received the flu vaccine in the past year, decreasing to 33% of those with incomes less than $25,000.

- Ninety-three percent (93%) of parents reported their child had received all their recommended vaccinations.

- Parents reported their child did not get all their recommended vaccinations for the following reasons:
  - Child had received some, but not all recommended vaccinations (3%)
  - Parents chose not to vaccinate their child (1%)
  - Fear of negative effects (1%)
  - Alternate vaccination schedule used (1%)
  - Not sure which are recommended (1%)
  - Religious or cultural beliefs (1%)
  - Vaccine not available at doctor's office (<1%)
  - Too expensive (<1%)
  - Other reasons (1%)

Child 0-5 Comparisons	Lucas County 2014 Ages 0-5	Lucas County 2017 Ages 0-5	Lucas County 2020 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Had public insurance	28%	28%	17%	32%	33%
Been to doctor for preventive care (in the past year)	95%	96%	100%	92%¥	89%¥
Received all the medical care they needed	93%	99%	94%	N/A	N/A
Had a personal doctor or nurse	56%	88%	84%	72%	72%
Family had problems paying for child's medical or health care bills (in past year)	N/A	N/A	15%	7%	9%

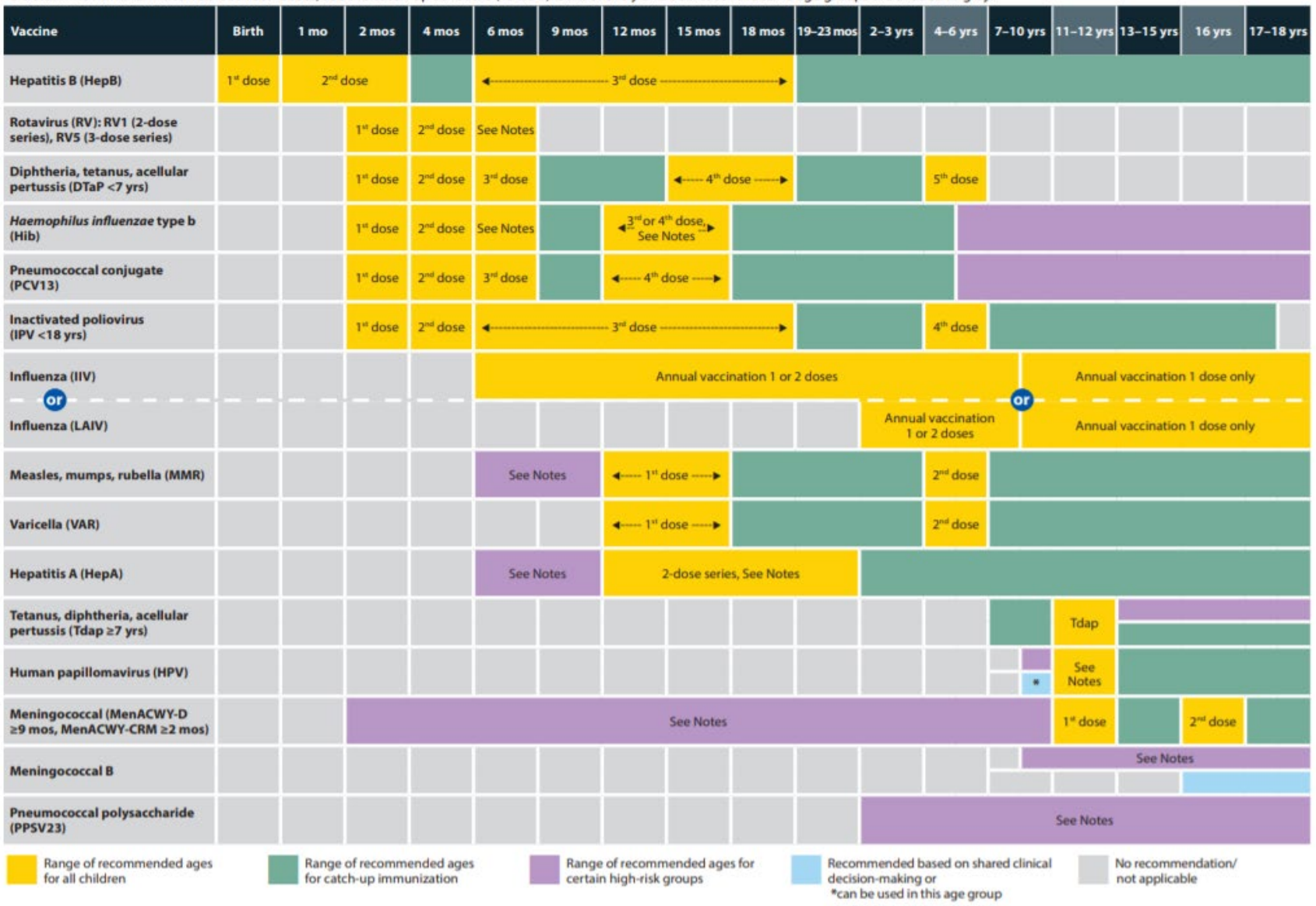
¥2016/17 NSCH data
N/A – Not Available

Child 6-11 Comparisons	Lucas County 2014 Ages 6-11	Lucas County 2017 Ages 6-11	Lucas County 2020 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Had public insurance	22%	26%	20%	25%	32%
Been to doctor for preventive care (in the past year)	88%	92%	93%	81%¥	80%¥
Received all the medical care they needed	94%	96%	86%	N/A	N/A
Had a personal doctor or nurse	58%	85%	84%	77%	72%
Family had problems paying for child's medical or health care bills (in past year)	N/A	N/A	10%	10%	11%

¥2016/17 NSCH data
N/A – Not Available

Table 1 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2020

These recommendations must be read with the notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars. To determine minimum intervals between doses, see the catch-up schedule (Table 2). School entry and adolescent vaccine age groups are shaded in gray.



(Source: Centers for Disease Control and Prevention, Immunization Schedules, 2020)

Child Health: Early Childhood (Ages 0-5)

Key Findings

The following information was reported by parents of 0-5 year olds. Ninety-four percent (94%) of mothers got prenatal care within the first three months during their last pregnancy. Sixteen percent (16%) of mothers received WIC services during their last pregnancy. Ninety percent (90%) of parents put their child to sleep on his/her back. Sixteen percent (16%) of mothers never breastfed their child.

Early Childhood

- During their last pregnancy, mothers did the following:
  - Took a multivitamin with folic acid during pregnancy (100%)
  - Received prenatal care within the first three months (94%)
  - Took a multivitamin with folic acid pre-pregnancy (80%)
  - Received a dental exam (62%)
  - Took folic acid during pregnancy (38%)
  - Experienced anxiety during or after pregnancy (31%)
  - Experienced depression during or after pregnancy (27%)
  - Took folic acid pre-pregnancy (24%)
  - Received WIC services (16%)
  - Smoked cigarettes or other tobacco products (4%)
  - Experienced domestic violence (2%)
  - Did not have reliable transportation during or after pregnancy (2%)
  - Used marijuana (2%)
  - Consumed alcoholic beverages (1%)
  - Received opiate replacement therapy (1%)
  - Used e-cigarettes/vapes (1%)

- Thinking back to their last pregnancy, 46% of women wanted to be pregnant then, 24% wanted to be pregnant sooner, 7% did not want to be pregnant then or any time in the future, 11% wanted to be pregnant later, and 12% of women did not recall.

- Ninety-three percent (93%) of Lucas County mothers reported they attended their post-partum checkup within three to eight weeks after delivery. Three percent (3%) of mothers reported they were not scheduled a three to eight-week post-partum checkup.

- One third (33%) of mothers had children less than 27 months apart.

- When asked how parents put their child to sleep as an infant, 90% said on their back, 5% said on their stomach, and 3% said on their side. Two percent (2%) of parents reported they did not know.

- Lucas County parents reported putting their child to sleep in the following places:
  - Crib/bassinette without bumper, blankets, or stuffed animals (77%)
  - Pack n' play (55%)
  - Swing (30%)
  - In bed with another person (25%)
  - Car seat (19%)
  - Crib/bassinette with bumper, blankets, or stuffed animals (18%)
  - Floor (7%)
  - Couch or chair (4%)

- Lucas County parents reported their childcare decisions were influenced by the following: trust in staff (74%), location/environment (62%), cost (61%), number of kids to teacher ratio (50%), hours of operation (49%), if the childcare is licensed (43%), quality star ratings (40%), and if Early Head Start is available (5%). Fourteen percent (14%) of Lucas County parents reported none of the above, and 2% of parents reported having no preference when making childcare decisions.

- In the past month, parents reported their child regularly attended the following:
  - Nursery school, pre-school or kindergarten (44%)
  - Childcare in their home provided by a relative other than a parent/guardian (41%)
  - Childcare outside of their home provided by a relative other than a parent/guardian (33%)
  - Childcare center (30%)
  - Family-based childcare outside of home (26%)
  - Childcare in their home provided by a babysitter (24%)
  - Elementary school (11%)
  - Head Start or Early Start program (3%)

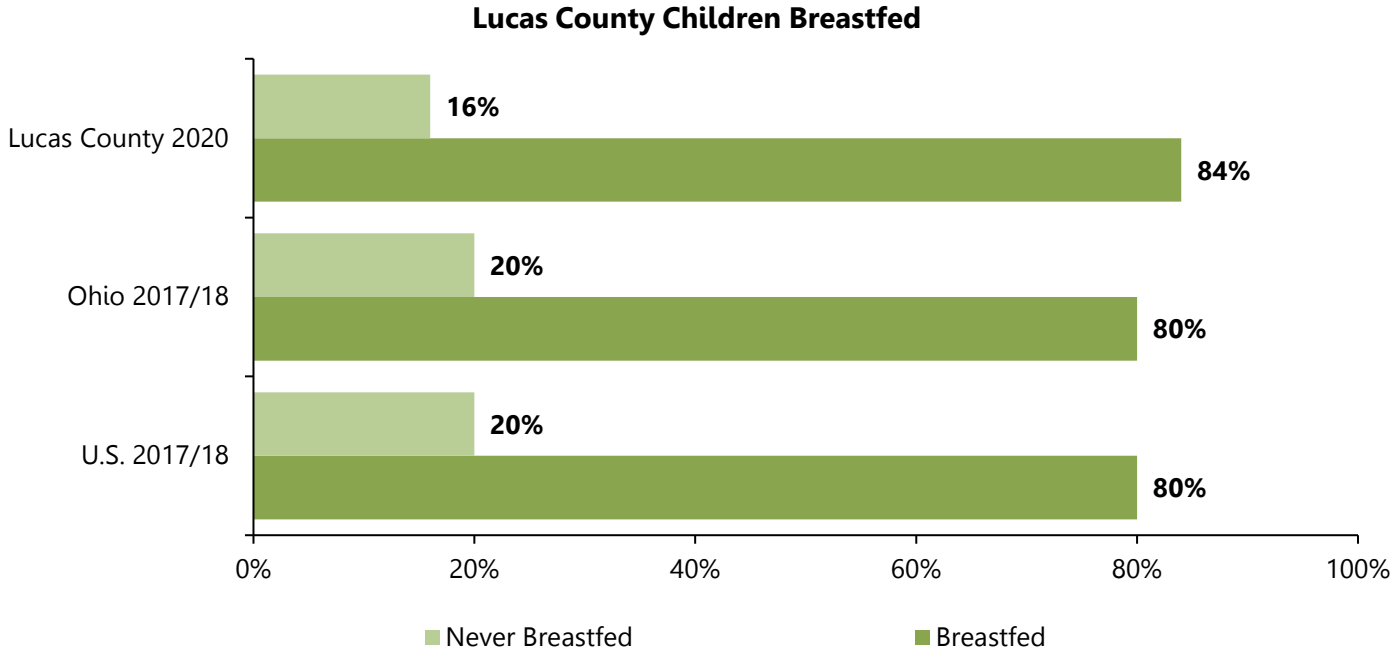
- Mothers breastfed their child for the following amounts of time:
  - Less than three months (24%)
  - Four to six months (15%)
  - Seven to nine months (8%)
  - 10 months to one year (14%)
  - More than one year (18%)
  - Still breastfeeding (6%)
  - Never breastfed (16%)

- Parents gave the following reasons why their child was not breastfed for one year:
  - Did not produce enough milk (48%)
  - Did not want to (21%)
  - Inconvenient (13%)
  - Did not have time (12%)
  - Did not have workplace support (8%)
  - Medical issue with baby (7%%)
  - Medical issues with self (5%)
  - Did not have adequate family support (4%)
  - Did not have adequate education (1%)
  - Other (21%)
  - No one reported they did not have a breast pump or for cultural reasons

Breastfeeding

The following graph shows the percent of infants who had been breastfed or given breast milk in Lucas County, Ohio, and U.S.

- Lucas County had a higher percent of children who had been breastfed for any length of time, compared to Ohio and the U.S.



(Sources: National Survey of Children's Health & 2020 Lucas County Health Assessment)

Child 0-5 Comparisons	Lucas County 2014 Ages 0-5 Years	Lucas County 2017 Ages 0-5 Years	Lucas County 2020 Ages 0-5 Years	Ohio 2017/18 Ages 0-5 Years	U.S. 2017/18 Ages 0-5 Years
Never breastfed their child	29%	22%	16%	20%	20%
Child put to bed on their back	68%	81%	90%	N/A	N/A

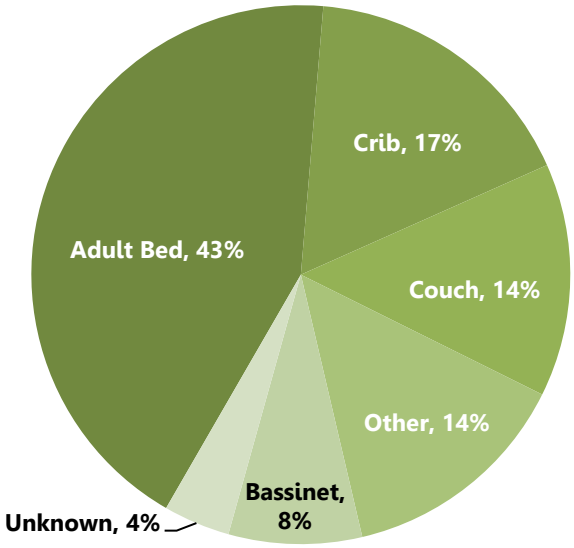
N/A – Not Available

Sleep-Related Infant Death Factors

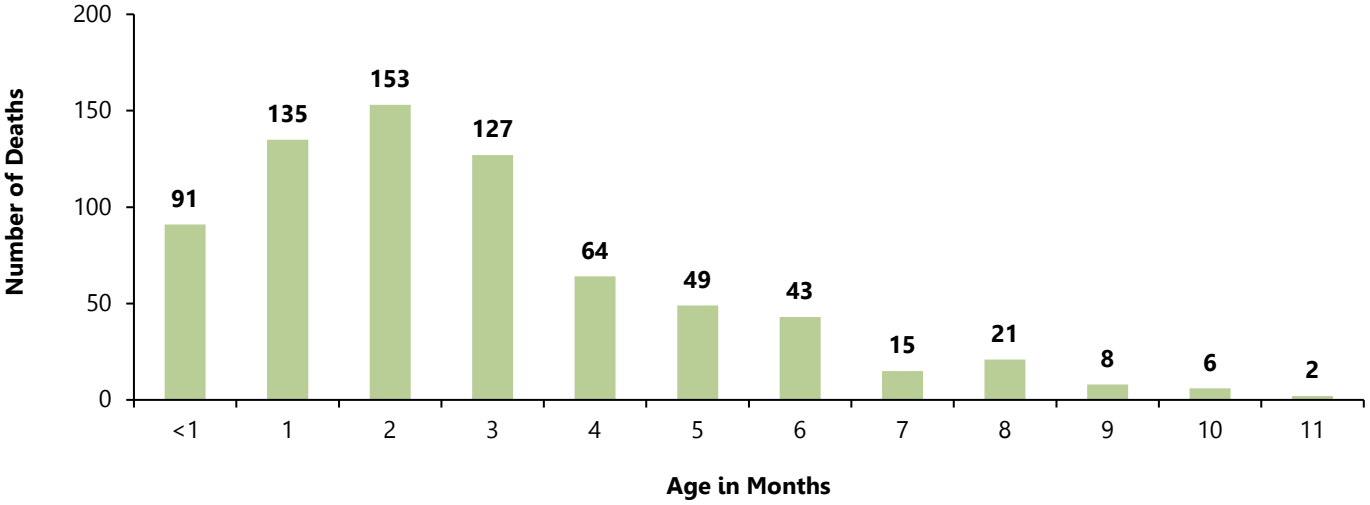
The following charts show the percentage of Ohio infant deaths by location when the infant was found and the age of infant at time of death.

- More than two-fifths (43%) of the sleep-related infant deaths in Ohio were found in an adult bed.
- Nearly three-fifths (58%) of the sleep-related deaths involved infants between one month and three months old.

Reviews of Ohio Sleep-Related Infant Deaths by Incident Location, 2012-2016 (n=714)



Ohio Sleep-Related Infant Deaths by Age in Months, 2012-2016 (n=714)



(Source: ODH, Ohio Child Fatality Review, Seventeen Annual Report)

Child Health: Middle Childhood (Ages 6-11)

Key Findings

The following information was reported by Lucas County parents of 6-11 year olds. Ninety-two percent (92%) of parents reported their child participated in extracurricular activities. More than three-fourths (77%) of parents reported their child was physically active for at least 60 minutes on three or more days per week.

Middle Childhood

- Lucas County children were enrolled in the following types of schools: public (71%), private (12%), and home-schooled (6%). No parent reported that their child was not enrolled in school.

- Ninety-two percent (92%) of parents reported their child participated in extracurricular activities in the past year. They participated in the following: a sports team or sports lessons after school or on weekends (74%); a club or organization after school or on weekends (53%); any other organized activities or lessons, such as music, dance, language, or other arts (48%); any type of community service or volunteer work at school, church, or in the community (37%); and any paid work including regular jobs as well as babysitting, cutting grass, or other occasional work (13%). Eight percent (8%) of parents reported their child did not participate in any extracurricular activities in the past year.

- More than one-fourth (27%) of parents reported their child had a social media or other virtual network account. Of those who had an account, they reported the following:
  - They had their child's password (78%)
  - They knew all of the people in their child's "my friends" (71%)
  - Their child's account was checked private (57%)
  - Their child had a problem as a result of their account (4%)

- More than three-fourths (77%) of parents reported their child was physically active for at least 60 minutes on three or more days per week. Nearly half (46%) were physically active on five or more days, and 13% were physically active for at least 60 minutes every day per week. Three percent (3%) reported not engaging in any physical activity in the past week.

- Over half (55%) of Lucas County parents reported they would vaccinate their child for the human papilloma virus (HPV). Six percent (6%) reported their child had already been vaccinated for HPV, and 34% said they are unsure if the HPV vaccine is safe. Five percent (5%) reported their child is not going to have sex.

- Thirty-four percent (34%) of parents believed that teaching the reproductive system should be taught in grades 3-5. Fifty percent (50%) believed it should be taught in grades 6-8, 8% believed in grades K-2, and 9% believed it should be taught in grades 9-12.

- Fifty-nine percent (59%) of parents believed that abstinence and refusal skills should be taught in grades 6-8. Seventeen percent (17%) believed it should be taught in grades 3-5, 11% believed in grades K-2, and 12% believed it should be taught in grades 9-12. One percent (1%) of parents thought this should not be taught at all.

- Half (50%) of parents thought that birth control and the use of condoms should be taught in grades 6-8. Forty-two percent (42%) believed it should be taught in grades 9-12, and 4% believed it should be taught in grades 3-5. Four percent (4%) of parents thought this should not be taught at all.

- Lucas County parents reported their child read outside of school at the following frequencies:
  - Almost never, child cannot read (1%)
  - Almost never, child has no interest (5%)
  - A few times a year (3%)
  - A few times a month (10%)
  - A few times a week (22%)
  - Almost every day (59%)

- Parents discussed the following topics with their 6-11 year old child in the past year: screen time (86%), bullying/violence (84%), eating habits (82%), cyber/Internet safety (66%), body image (61%), cultural sensitivity (53%), firearm/gun safety (47%), negative effects of tobacco (46%), respect for gender identity/sexual orientation (41%), negative effects of alcohol (38%), negative effects of marijuana and other drugs (35%), refusal skills (31%), negative effects of heroin/opiates (29%), dating 2\and positive relationships (20%), prescription drug misuse (19%), abstinence and how to refuse sex (15%), birth control (7%), and condoms/safe sex/STD prevention (6%). One percent (1%) of parents did not discuss any of these topics with their 6-11 year old child.

Child 6-11 Comparisons	Lucas County 2014 Ages 6-11 Years	Lucas County 2017 Ages 6-11 Years	Lucas County 2020 Ages 6-11 Years	Ohio 2017/18 Ages 6-11 Years	U.S. 2017/18 Ages 6-11 Years
Child participated in one or more activities	N/A	N/A	92%	78%	78%

N/A – Not Available

How to Help Increase Your School-Aged Child's Social Ability

- Consider the following as ways to foster your school-aged child's social abilities:
  - Set and provide appropriate limits, guidelines, and expectations and consistently enforce using appropriate consequences.
  - Model appropriate behavior.
  - Offer compliments for your child being cooperative and for any personal achievements.
  - Help your child choose activities that are appropriate for your child's abilities.
  - Encourage your child to talk with you and be open with his or her feelings.
  - Encourage your child to read and read with your child.
  - Encourage your child to get involved with hobbies and other activities.
  - Encourage physical activity.
  - Encourage self-discipline; expect your child to follow rules that are set.
  - Teach your child to respect and listen to authority figures.
  - Encourage your child to talk about peer pressure and help set guidelines to deal with peer pressure.
  - Spend uninterrupted time together—giving full attention to your child.
  - Limit television, video, and computer time.

(Source: Stanford Children's Health, The Growing Child: School Age [6 to 12 Years], 2019)

Child Health: Family and Community Characteristics

Key Findings

Five percent (5%) of parents reported someone in their household went to bed hungry at least one day per week because they did not have enough money for food. Sixty-five percent (65%) of parents reported their neighborhood was always safe for their child to go out and play. Seven percent (7%) of parents reported their child experienced two or more adverse childhood experiences (ACEs) in their lifetime.

2017/18 National Survey of Children's Health

- Fifty-seven percent (57%) of Ohio and 54% of U.S. parents of 0-5 year olds reported their family ate a meal together every night of the week.
- Twenty-seven percent (27%) of Ohio and 20% of U.S. 6-11 year olds experienced two or more adverse childhood experiences (ACEs) in their lifetime.

(Source: National Survey of Children's Health, 2017/18)

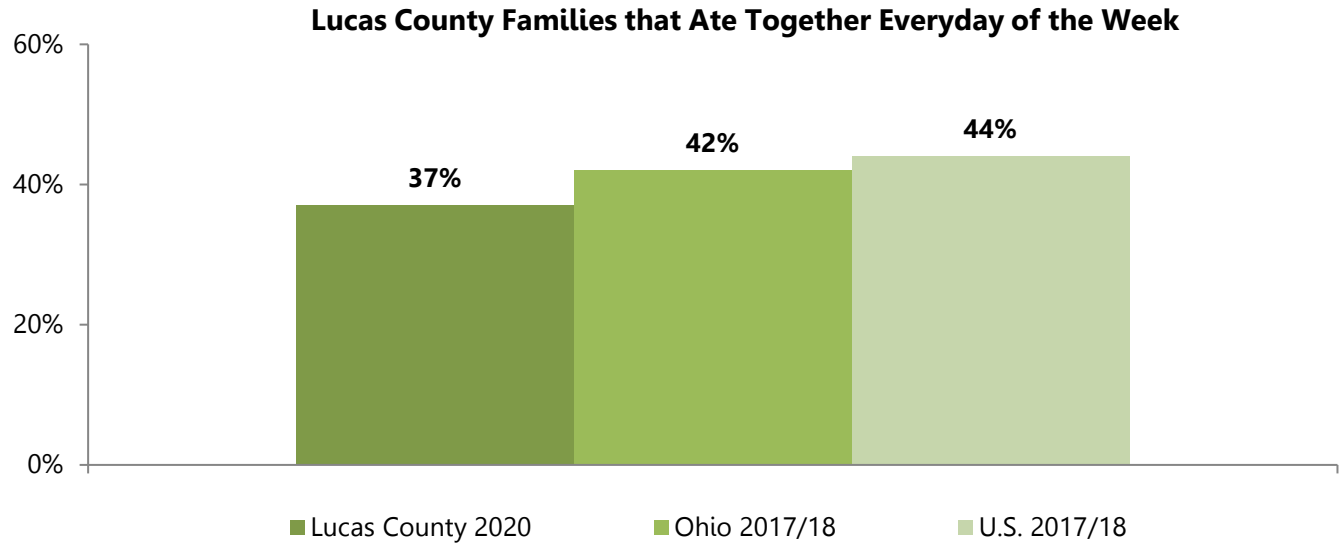
Family Functioning

- Thirty-seven percent (37%) of parents reported that every family member who lived in their household ate a meal together every day of the week, increasing to 51% of parents of 0-5 year olds. Families ate a meal together an average of 5.0 days per week.
- Lucas County families reported their primary language spoken in their home was English (99%), Spanish (<1%), and Arabic (<1%).
- Five percent (5%) of parents reported someone in their household went to bed hungry at least one day per week because they did not have enough money for food, increasing to 12% of those with incomes less than $25,000.
- Parents reported their child got the following amounts of sleep on an average weeknight:
  - Eight hours or less (24%)
  - Nine hours (26%)
  - Ten hours (30%)
  - Eleven hours or more (21%)
- Six percent (6%) of parents, increasing to 15% of those with incomes less than $25,000, reported that they or someone in their family had to quit a job, not take a job, or greatly change their job because of the following problems concerning child care for their child: could not afford child care (5%), physical disability (1%), child was medically fragile (<1%), severe behaviors (<1%), and their child was removed from school (<1%).
- In the past year, parents reported that someone in the household received the following:
  - Free or reduced cost breakfast or lunches at school (14%)
  - SNAP/food stamps (10%)
  - Mental health/substance abuse treatment (7%)
  - Benefits from WIC program (5%)
  - Help Me Grow (3%)
  - Cash assistance from a welfare program (2%)
  - Subsidized childcare through JFS (2%)
  - Head Start/Early Head Start (1%)
- Parents reported doing the following activities with their child outside of school within the past year: cleaning the home or yard work (85%); walking, jogging, or running (79%); swimming (73%); sports (59%); biking (58%); dancing (45%); playing tag or jumping rope (43%); hiking (29%); and skateboarding or rollerblading (10%).

Family Dinners

The following graph shows the percent of Lucas County, Ohio, and U.S. families that ate a meal together every day of the week.

- Thirty-seven percent (37%) of Lucas County families ate a meal together every day of the week.



(Source: National Survey of Children's Health & 2020 Lucas County Health Assessment)

Five Ways That Family Meals Keep Kids Healthy

1. **Family meals prevent excessive weight gain:** Eating 3 or more family meals (meaning at least one parent is present and the meal is prepared at home) results in a 12% lower likelihood of children being overweight.

2. **Family meals teach healthy food choices:** The eating habits of childhood often last a lifetime. Families that ate at least three meals together each had a 20% decrease in unhealthy food choices. Teaching your children to enjoy healthy foods rather than junk foods is a gift that will stay with them through adulthood.

3. **Family meals prevent eating disorders:** Children and adolescents who ate family meals at least three times per week had a 35% reduction in disordered eating habits such as anorexia and bulimia.

4. **Family dinner improves social-emotional health, too:** The ability to understand emotions, express empathy, demonstrate self-regulation, and form positive relationships with peers and adults is called social-emotional health. Young children with high social-emotional health adapt well to the school environment and perform well academically, even in long term studies. Guess which kids had the best social-emotional health? The ones who ate family dinner together regularly and talked about their day, told stories, etc.

5. **Family dinner can help kids deal with cyberbullying:** About one-fifth of adolescents are victims of cyberbullying, putting them at risk for depression, substance abuse, and a host of other concerns. But adolescents who eat regular family dinners handle cyberbullying better and are less likely to engage in substance abuse or develop psychiatric health concerns, even after their involvement in face-to-face bullying is taken into account.

(Source: The Benefits & Tricks to Having a Family Dinner, HealthyChildren.org, December 30, 2015)

Child Safety Characteristics

Lucas County parents indicated that their child rode in a car seat, booster seat, or wore a seatbelt at the following frequencies:

Car Seat	Booster Seat	Seat Belt with No Booster Seat
Always (42%)	Always (30%)	Always (51%)
Nearly always (<1%)	Nearly always (5%)	Nearly always (4%)
Sometimes (1%)	Sometimes (3%)	Sometimes (2%)
Seldom (0%)	Seldom (3%)	Seldom (3%)
Never (5%)	Never (19%)	Never (7%)
Child is too big for car seat (52%)	Child is over 4'9" and 80 lbs. (23%) OR Child is too small for booster seat (19%)	Child is too small for seat belt with no booster seat (smaller than 4'9" and 80 lbs.) (35%)

- Forty-two percent (42%) of parents reported their child was bullied in the past year. The following types of bullying were reported:
  - 18% were verbally bullied (teased, taunted or called harmful names)
  - 8% were physically bullied (they were hit, kicked, punched or people took their belongings)
  - 7% were indirectly bullied (spread mean rumors about them or kept out of a "group")
  - 3% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)

- Four percent (4%) of parents reported they did not know if their child was bullied.

Neighborhood and Community Characteristics

- Lucas County parents reported their neighborhood was always safe (65%), usually safe (30%), sometimes safe (4%), and never safe (1%) for their child to go out and play.

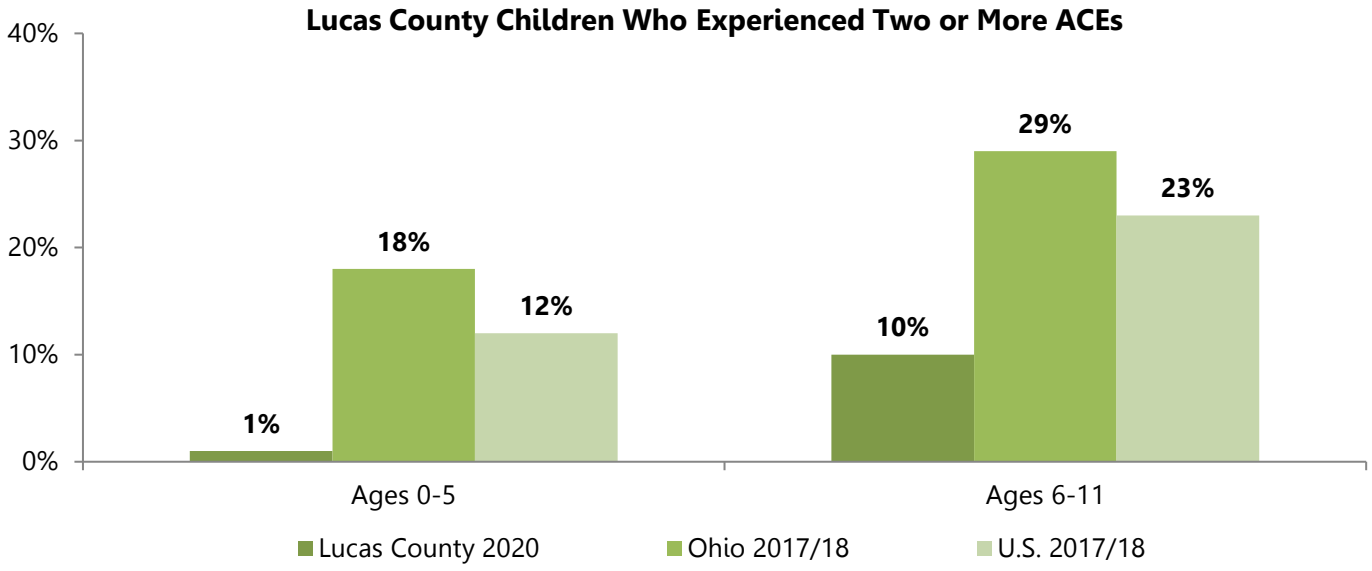
- Parents reported the following reasons they did not feel their neighborhood was safe: heavy traffic area (12%), no accessible sidewalks (10%), crime (9%), no place for kids to play (4%), loud/disrespectful noise levels (3%), bullying (2%), gangs (1%), and other (6%).

- Lucas County parents reported their child experienced the following adverse childhood experiences (ACEs) in their lifetime: their parents became separated or were divorced (11%); lived with someone who was mentally ill, or suicidal, or severely depressed for more than a couple of weeks (6%); lived with someone who had a problem with alcohol or drugs (5%); lived with a parent/guardian who served time or was sentenced to serve time in prison or jail (3%); seen or heard any parents or adults in their home hit, beat, kicked, or physically hurt each other (3%); been the victim of violence or witness violence in their neighborhood (2%), lived with a parent/guardian who died (1%); and were treated or judged unfairly because his/her ethnic group (1%).

- Seven percent (7%) of parents reported their child experienced two or more ACEs in their lifetime, increasing to 23% of those with incomes less than $25,000.

The following graph shows the percent of Lucas County, Ohio, and U.S. children who experienced two or more ACEs.

- Lucas County had a lower percent of children who experienced two or more ACEs as compared to Ohio and U.S children.



(Source: National Survey of Children's Health & 2020 Lucas County Health Assessment)

Home Environment Characteristics

- Nine percent (9%) of Lucas County parents reported their child had moved to a new address three or more times, increasing to 26% of those with incomes less than $25,000. Thirty percent (30%) moved one time, 11% moved two times, and 51% had never moved.

- Parents reported having the following safety items in their home: working smoke alarm/detector (98%), carbon monoxide detector (76%), fire extinguisher (63%), and Poison Control number by the phone (36%). Ninety percent (90%) had more than one of these safety items in their home, and 2% had none of these safety items in their home.

- Thirty percent (30%) of parents reported they had a firearm in or around their home. No parent (0%) reported they were unlocked and loaded.

- Lucas County parents reported that someone in the household used cigarettes (7%), e-cigarettes/vapes (4%), cigars (1%), and/or other tobacco products (3%) around their child.

- Parents had the following rules about smoking tobacco products in their home and car: no one is allowed to smoke inside the car at any time (86%); no one is allowed to smoke inside the home when children are present (39%); smoking is allowed, but only if children are not in the car (5%); smoking is allowed anywhere inside the home (2%); smoking is allowed, but only in certain rooms (2%); smoking is allowed, but only with one or more of the windows open in the car (2%), and smoking is allowed inside the car (1%).

- Parents had the following rules about using e-cigarette/vaping products in their home and car: no one is allowed to smoke inside the car at any time (84%); no one is allowed to smoke inside the home when children are present (35%); smoking is allowed anywhere inside the home (4%); smoking is allowed inside the car (3%); smoking is allowed, but only if children are not in the car (2%); smoking is allowed, but only with one or more of the windows open in the car (1%), and smoking is allowed, but only in certain rooms (<1%).

Child 0-5 Comparisons	Lucas County 2014 Ages 0-5 Years	Lucas County 2017 Ages 0-5 Years	Lucas County 2020 Ages 0-5 Years	Ohio 2017/18 Ages 0-5 Years	U.S. 2017/18 Ages 0-5 Years
Family ate a meal together every day of the week	50%	35%	51%	57%	54%
Neighborhood is usually or always safe	89%	90%	95%	N/A	N/A
Child experienced two or more ACEs	N/A	N/A	0%	13%	10%
Parent or family member quit a job, did not take a job, or greatly changed job because of problems with childcare for child (in past year)	N/A	N/A	6%	10%	9%
Primary language spoken at home was dialect other than English	N/A	N/A	1%	5%	16%

N/A – Not Available

Child 6-11 Comparisons	Lucas County 2014 Ages 6-11 Years	Lucas County 2017 Ages 6-11 Years	Lucas County 2020 Ages 6-11 Years	Ohio 2017/18 Ages 6-11 Years	U.S. 2017/18 Ages 6-11 Years
Family ate a meal together every day of the week	39%	35%	29%	44%	45%
Neighborhood is usually or always safe	95%	91%	94%	N/A	N/A
Child experienced two or more ACEs	N/A	N/A	10%	27%	20%
Parent or family member quit a job, did not take a job, or greatly changed job because of problems with childcare for child (in past year)	N/A	N/A	5%	N/A	N/A
Primary language spoken at home was dialect other than English	N/A	N/A	1%	5%	14%

N/A – Not Available

Child Health: Parent Health

Key Findings

In 2020, 61% of parents rated their health as excellent or very good, decreasing to 33% of parents with incomes less than $25,000. In the past year, 56% of parents missed work due to their child's illnesses or injuries.

Parent Health

- Those filling out the survey had the following relationship to the child: mother (71%), father (26%), grandparent (1%), and aunt/uncle (1%).
- Fourteen (14%) of parents were uninsured.
- Sixty-one percent (61%) of parents rated their physical health as excellent or very good, decreasing to 33% of parents with incomes less than $25,000. Eight percent (8%) of parents had rated their physical health as fair or poor.
- Sixty-five percent (65%) of mothers and 54% of fathers of 0 to 5 year olds rated their rated their physical health as excellent or very good. Nine percent (9%) of mothers and 8% of fathers of 6 to 11 year olds rated their physical health as fair or poor.
- Sixty-four percent (64%) of parents rated their mental and emotional health as excellent or very good, decreasing to 26% of parents with incomes less than $25,000. More than one-fourth (27%) rated their mental and emotional health as good, and 10% of parents rated their mental and emotional health as fair or poor.
- Seven percent (7%) of mothers and 7% of fathers of 0-5 year olds rated their mental and emotional health as fair or poor. Thirteen percent (13%) of mothers and 6% of fathers of 6-11 year olds rated their mental or emotional health as fair or poor.
- Parents reported the following challenges they faced in regard to the day-to-day demands of parenthood/ raising children:
  - Demands of multiple children (44%)
  - Working long hours (20%)
  - Financial burdens (15%)
  - Being a single parent (11%)
  - Managing child's behavior (11%)
  - Metal health (9%)
  - Loss of freedom (8%)
  - Child has special needs (7%)
  - Lack of parental support (4%)
  - Difficulty with lifestyle changes (4%)
  - Affordable housing (3%)
  - Post-partum depression (3%)
  - Unemployment (2%)
  - Lack of transportation (1%)
  - Alcohol and/or drug abuse (1%)
  - Move a lot (<1%)
  - Domestic violence relationship (<1%)
- Thirty-seven (37%) of parents reported having more than one difficulty, increasing to 46% of parents with incomes of less than $25,000.
- Parents did not apply for WIC for the following reasons: did not want to receive public assistance (7%), already enrolled in WIC (5%), food stamps are easier to get and use (1%), too much paperwork/renewal every six months (1%), inconvenient work schedule (<1%), and other reasons (3%). Five percent (5%) of Lucas County parents did not know if their child qualified for WIC services. Eighteen percent (18%) of parents reported their child did not qualify for WIC.

- In the past year, 56% of parents reported they or someone in their household missed work due to their child's illnesses or injuries. Forty-one percent (41%) missed work due to their child's medical appointments, 6% missed work due to lack of or unreliable childcare, 4% missed work due to their child's chronic illness, 4% missed work due to their child's behavioral/emotional problems, and 1% missed work due to suspension/expulsion/sent home from school.

- During the past year, Lucas County parents felt their experience with health care was:
  - The same as people of other races/cultures/ethnicities (37%)
  - Better than people of other races/cultures/ethnicities (16%)
  - Only encountered people of the same race/culture/ethnicity (4%)
  - Worse than people of other races/cultures/ethnicities (2%)
  - Worse than some people of races, better than others (1%)
  - Worse than some people of races/cultures/ethnicities (<1%)

- Thirty-eight percent (38%) of adults did not know if their experience with health care was better or worse than other races and 3% did not get health care in the past year.

Child 0-5 Comparisons	Lucas County 2014 Ages 0-5	Lucas County 2017 Ages 0-5	Lucas County 2020 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Mother's mental or emotional health is fair/poor	4%	10%	7%	9%	5%
Father's mental or emotional health is fair/poor	2%	6%	7%	7%	3%
Mother's physical health status is fair/poor	2%	6%	3%	3%	4%
Father's physical health status is fair/poor	2%	6%	11%	3%	5%

Child 6-11 Comparisons	Lucas County 2014 Ages 6-11	Lucas County 2017 Ages 6-11	Lucas County 2020 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Mother's mental or emotional health is fair/poor	8%	9%	13%	9%	5%
Father's mental or emotional health is fair/poor	1%	9%	6%	4%	3%
Mother's physical health status is fair/poor	2%	6%	9%	7%	6%
Father's physical health status is fair/poor	2%	6%	8%	7%	4%

Appendix I: Health Assessment Information Sources

Source	Data Used	Website
American Academy of Pediatrics	• 5 Ways That Family Meals Keep Kids Healthy	https://www.healthychildren.org/English/health-issues/conditions/obesity/Pages/5-easy-ways-to-improve-your-familys-eating-habits.aspx
American Association of Suicidology	• Suicide in the U.S.	https://suicidology.org/facts-and-statistics/
American Cancer Society	• 2020 Cancer Facts, Figures, and Estimates	https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2020.html
	• 2019-2021 Cancer Facts and Figures for African Americans	https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-facts-and-figures-for-african-americans/cancer-facts-and-figures-for-african-americans-2019-2021.pdf
	• Recommendations for Prostate Cancer Early Detection	https://www.cancer.org/cancer/prostate-cancer/detection-diagnosis-staging/acs-recommendations.html
	• Summary of the ACS Guidelines on Nutrition and Physical Activity	https://www.cancer.org/healthy/eat-healthy-get-active/acs-guidelines-nutrition-physical-activity-cancer-prevention/guidelines.html
American College of Allergy, Asthma & Immunology	• Asthma Facts	http://acaai.org/news/facts-statistics/asthma
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	• 2017, 2018 Adult Ohio and U.S. Correlating Statistics	https://www.cdc.gov/brfss/index.html
Brady Campaign to Prevent Gun Violence	• Victims of Gun Violence	https://www.bradyunited.org/fact-sheets
Centers for Disease Control and Prevention (CDC)	• Adverse Childhood Experiences (ACEs)	https://www.cdc.gov/violenceprevention/aces/fastfact.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facestudy%2Ffastfact.html
	• Arthritis: Key Public Health Messages	https://www.cdc.gov/arthritis/basics/management.htm
	• Basic Facts about Mold and Dampness	https://www.cdc.gov/mold/faqs.htm
	• Cancer Fast Facts	https://www.cdc.gov/chronicdisease/resources/publications/factsheets/cancer.htm

Source	Data Used	Website
Centers for Disease Control and Prevention (CDC)	• Children's Mental Health	https://www.cdc.gov/childrensmentalhealth/basics.html
	• Disparities in Oral Health	https://www.cdc.gov/oralhealth/oral_health_disparities/index.htm
	• E-Cigarettes and Youth	https://www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html
	• Economic Costs of Excessive Alcohol Use	https://www.cdc.gov/features/costsofdrinking/index.html
	• Facts About Adult Oral Health	https://www.cdc.gov/oralhealth/basics/adult-oral-health/index.html
	• Five Minutes for Women's Health	https://www.cdc.gov/healthequity/features/fiveminutes/index.html
	• Hispanic/Latinos and Tobacco Use	https://www.cdc.gov/tobacco/disparities/hispanics-latinos/index.htm
	• Immunization Schedules	https://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-child-combined-schedule.pdf
	• Men and Heart Disease	https://www.cdc.gov/heartdisease/men.htm
	• National Diabetes Statistics Report, 2020	https://www.cdc.gov/diabetes/pdfs/data/statistics/national-diabetes-statistics-report.pdf
	• Preventing Teen Drinking and Driving	https://www.cdc.gov/vitalsigns/mobile-test/index.html
	• Prostate Cancer Screening	https://www.cdc.gov/cancer/prostate/basic_info/screening.htm
	• Reproductive Health: Unintended Pregnancy	https://www.cdc.gov/reproductivehealth/contraception/unintendedpregnancy/index.htm
	• Sexual Risk Behavior	https://www.cdc.gov/healthyyouth/sexualbehaviors/index.htm
	• Smoking and Tobacco Use: About Electronic Cigarettes	https://www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html
	• Smoking and Tobacco Use: Cost of Smoking	https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm
	• State Indicator on Fruits and Vegetables: Improving Fruit and Vegetable Access	https://www.cdc.gov/nutrition/downloads/fruits-vegetables/2018/2018-fruit-vegetable-report-508.pdf
	• Youth Depression: Signs and Symptoms	https://www.cdc.gov/childrensmentalhealth/depression.html
	• Youth Physical Activity Guidelines	https://www.cdc.gov/healthyschools/physicalactivity/guidelines.htm
CDC, Wonder, U.S.	• About Underlying Cause of Death, 2016-2018 • U.S. age-adjusted mortality rates	http://wonder.cdc.gov/ucd-icd10.html

Source	Data Used	Website
Healthy People 2020: U.S. Department of Health & Human Services	• All Healthy People 2020 Target Data Points • Some U.S. Baseline Statistics • Social Determinants of Health	www.healthypeople.gov/2020/topicsobjectives2020
Kaiser Family Foundation	• Health and Health Care for Hispanics in the U.S.	https://www.kff.org/infographic/health-and-health-care-for-hispanics-in-the-united-states/
National Alliance on Mental Illness (NAMI)	• African American Mental Health	https://www.nami.org/Your-Journey/Identity-and-Cultural-Dimensions/Black-African-American
	• Common Signs of Mental Illness in Adults	https://www.nami.org/NAMI/media/NAMI-Media/Infographics/NAMI-Warning-Signs-FINAL.pdf
National Cancer Institute	• Cancer Disparities among African American Women	https://www.cancer.gov/about-cancer/understanding/disparities
National Institute on Alcohol Abuse and Alcoholism	• Alcohol and the Hispanic Community	https://www.niaaa.nih.gov/sites/default/files/hispanicFact.pdf
National Survey of Children's Health (NSCH)	• Ohio and U.S. 2017/2018 Correlating Statistics	https://www.childhealthdata.org/browse/survey
Ohio Automated Rx Reporting System (OARRS)	• Lucas County Number of Opiate and Pain Reliver Doses Per Capita and Per Patient • Ohio Number of Opiate and Pain Reliver Doses Per Capita and Per Patient	https://www.ohiopmp.gov/

Source	Data Used	Website
Ohio Department of Health	• 2018 Ohio Drug Overdose Data: General Findings	https://odh.ohio.gov/wps/wcm/connect/gov/d9ee6d3b-bf62-4b4f-8978-d7cfcd11348f/2018_OhioDrugOverdoseReport.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-d9ee6d3b-bf62-4b4f-8978-d7cfcd11348f-mXhFqNO
	• Ohio Child Fatality Review, Seventeenth Annual Report	https://odh.ohio.gov/wps/wcm/connect/gov/cee74f65-5513-4641-be17-833915bc6dfb/2017+CFR+Report+-11-2-17.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-cee74f65-5513-4641-be17-833915bc6dfb-mtrJzwN
Ohio Department of Health, Information Warehouse	• Incidence of Cancer, 2013-2017 • Lucas County and Ohio Birth Statistics • Lucas County and Ohio Leading Causes of Death • Lucas County and Ohio Mortality Statistics • Sexually Transmitted Diseases	www.odh.ohio.gov/
Ohio Department of Public Safety	• 2019 Lucas County and Ohio Crash Facts • OSHP Computer-Aided Dispatch (CAD) System	https://ohiohighwaysafetyoffice.ohio.gov/otso-resources.aspx#gsc.tab=0
Ohio Development Services Agency	• Ohio Poverty Report	https://www.development.ohio.gov/files/research/P7005.pdf
Ohio State Highway Patrol	• Compliant Data • Electronic Crash Records • Felony Cases and Drug Arrests • Lucas County Activity Statistics	http://statepatrol.ohio.gov/
Rape, Abuse, and Incest National Network (RAINN)	• Scope of the Problem	https://www.rainn.org/statistics/scope-problem

Source	Data Used	Website
Stanford Children's Health	• How to Increase Your School-Aged Child's Social Ability	https://www.stanfordchildrens.org/en/topic/default?id=the-growing-child-school-age-6-to-12-years-90-P02278
Substance Abuse and Mental Health Services Administration (SAMHSA)	• Rise in Prescription Drug Misuse and Abuse Impacting Teens	https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/teen-prescription-drug-misuse-abuse
U.S. Department of Agriculture Food Environment Atlas, County Health Rankings	• Food Environment Index	http://www.countyhealthrankings.org/
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	• American Community Survey 1-year estimates, 2019 • Federal Poverty Thresholds • Ohio and Lucas County 2019 Census Demographic Information • Ohio and U.S. Health Insurance Sources • Small Area Income and Poverty Estimates	www.census.gov
U.S. Department of Health and Human Services, Office of Minority Health	• Cancer and Hispanic Women	https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=61
	• Chronic Liver Disease and Hispanic Americans	https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=62
	• Hispanic/Latino Insurance Coverage	https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=64
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	• 2017 youth Ohio and U.S. correlating statistics	https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

Appendix II: Acronyms and Terms

AHS	**A**ccess to **H**ealth **S**ervices, Topic of Healthy People 2020 objectives
Adult	Defined as 19 years of age and older.
Age-Adjusted Mortality Rates	Death rate per 100,000 adjusted for the age distribution of the population.
Adult Binge Drinking	Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.
AOCBC	**A**rthritis, **O**steoporosis, and **C**hronic **B**ack **C**onditions
BMI	**B**ody **M**ass **I**ndex is defined as the contrasting measurement/relationship of weight to height.
BRFSS	**B**ehavior **R**isk **F**actor **S**urveillance **S**ystem, an adult survey conducted by the CDC.
CDC	**C**enters for **D**isease **C**ontrol and **P**revention.
Current Smoker	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
HCNO	**H**ospital **C**ouncil of **N**orthwest **O**hio
HDS	**H**eart **D**isease and **S**troke, Topic of Healthy People 2020 objectives
HP 2020	**H**ealthy **P**eople **2020**, a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
HPIO	**H**ealth **P**olicy **I**nstitute of **O**hio
Health Indicator	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
High Blood Cholesterol	240 mg/dL and above
High Blood Pressure	Systolic $\geq$140 and Diastolic $\geq$ 90
IID	**I**mmunizations and **I**nfectious **D**iseases, Topic of Healthy People 2020 objectives
N/A	Data is not available.
NSCH	**N**ational **S**urvey of **C**hildren's **H**ealth
ODH	**O**hio **D**epartment of **H**ealth
Race/Ethnicity	**Census 2010:** U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as "a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race." Data are presented as "Hispanic or Latino" and "Not Hispanic or Latino." Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, "White alone" or "Black alone", means the respondents reported only one race.
SHA	**S**tate **H**ealth **A**ssessment
SHIP	**S**tate **H**ealth **I**mprovement **P**lan
Weapon	Defined in the YRBS as "a weapon such as a gun, knife, or club"
Youth	Defined as 12 through 18 years of age
YPLL/65	**Y**ears of **P**otential **L**ife **L**ost before age 65. Indicator of premature death.

Youth BMI Classifications	**Underweight** is defined as BMI-for-age $\leq$ 5th percentile **Overweight** is defined as BMI-for-age 85th percentile to < 95th percentile. **Obese** is defined as $\geq$ 95th percentile.
YRBS	**Y**outh **R**isk **B**ehavior **S**urvey, a youth survey conducted by the CDC

Appendix III: Methods for Weighting the 2020 Lucas County Health Assessment Data

Data from sample surveys have the potential for bias if there are different rates of response for different segments of the population. In other words, some subgroups of the population may be more represented in the completed surveys than they are in the population from which those surveys are sampled. If a sample has 25% of its respondents being male and 75% being female, then the sample is biased towards the views of females (if females respond differently than males). This same phenomenon holds true for any possible characteristic that may alter how an individual responds to the survey items.

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2020 Lucas County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Lucas County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race/ethnicity (White, Black, Latino, other), Age (8 different age categories), and income (8 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Lucas County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2020 Lucas County Survey and the 2018 Census estimates.

	2020 Lucas Survey		**2018 Census**		**Weight**
Sex	Number	Percent	Number	Percent	
Male	339	49.41691	209,580	48.47136	0.98087
Female	347	50.58309	222,799	51.52864	1.01869

In this example, it shows that there was a slightly larger portion of males in the sample compared to the actual portion in Lucas County. The weighting for males was calculated by taking the percent of males in Lucas County (based on Census information) (48.47136%) and dividing that by the percent found in the 2020 Lucas County sample (49.41691%) [48.47136 / 49.41691 = weighting of 0.98087 for males]. The same was done for females [51.52864/ 50.58309 = weighting of 1.01869for females]. Thus, males' responses are weighted less by a factor of 0.98087 and females' responses weighted less by a factor of 1.01869.

This same thing was done for each of the 22 specific categories as described above. For example, a respondent who was female, Black, in the age category 35-44, and with a household income in the $50-$75k category would have an individual weighting of 1.43755 [1.01869 (weight for females) x 1.01336 (weight for Black) x 1.50010 (weight for age 35-44) x 0.92832 (weight for income $50-$75k)]. Thus, each individual in the 2020 Lucas County sample has their own individual weighting based on their combination of age, race/ethnicity, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 23.0) when calculating frequencies. For analyses done for the entire sample and analyses done based on subgroups other than age, race, sex, or income – the weightings that were calculated based on the product of the four weighting variables (age, race, sex, income) for each individual. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus, a total of eight weighting scores for each individual were created and applied depending on the analysis conducted. The weight categories were as follows:

1. **Total weight** (product of 4 weights) – for all analyses that did not separate age, race, sex, or income.
2. **Weight without sex** (product of age, race, and income weights) – used when analyzing by sex.
3. **Weight without age** (product of sex, race, and income weights) – used when analyzing by age.
4. **Weight without race** (product of age, sex, and income weights) – used when analyzing by race.
5. **Weight without income** (product of age, race, and sex weights) – used when analyzing by income.
6. **Weight without sex or age** (product of race and income weights) – used when analyzing by sex and age.
7. **Weight without sex or race** (product of age and income weights) – used when analyzing by sex and race.
8. **Weight without sex or income** (product of age and race weights) – used when analyzing by sex and income.

Category	Lucas Sample	%	Lucas 2018 Census*	%	Weighting Value
Sex:					
Male	339	49.41691	209,580	48.47136	0.980866
Female	347	50.58309	222,799	51.52864	1.018693
Age:					
20 to 34 years	54	8.05970	89,722	27.92598	3.464891
35 to 44 years	70	10.44776	50,354	15.67269	1.500100
45 to 54 years	115	17.16418	55,349	17.22738	1.003682
55 to 59 years	73	10.89552	31,067	9.66961	0.887485
60 to 64 years	83	12.38806	28,319	8.81429	0.711515
65 to 74 years	163	24.32836	38,444	11.96570	0.491842
75 to 84 years	91	13.58209	18,505	5.75968	0.424065
85+ years	21	3.13433	9,525	2.96466	0.945867
Race:					
White alone (non-Hispanic)	384	56.55376	297,943	68.90783	1.218448
African American (NH)	146	21.50221	94,213	21.78945	1.013359
Other (NH)	35	5.15464	40,223	9.30272	1.804727
Hispanic (any race)	114	16.78940	30,210	6.98693	0.416151
Household Income:					
Less than $15k	92	14.76726	28,646	15.99754	1.083312
$15k to $25k	86	13.80417	20,692	11.55558	0.837108
$25k to $35k	58	9.30979	20,035	11.18867	1.201818
$35k to $50k	91	14.60674	24,810	13.85530	0.948555
$50k to $75k	112	17.97753	29,884	16.68891	0.928321
$75k to $100k	67	10.75441	19,319	10.78882	1.003199
$100k to $150k	60	9.63082	21,857	12.20618	1.267409
$150k or more	57	9.14928	13,822	7.71898	0.843671

Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Lucas County in each subcategory by the proportion of the sample in the Lucas County survey for that same category.
***Lucas County population figures taken from the 2018 Census Estimates.**

The sampling for school districts was a probability sampling method based on enrollments in which larger districts would have a greater number of classes selected to be included in the 2020 Lucas County Youth Health Assessment. Schools were asked to select a general education class or classes for the identified grade level(s) to best represent a cross section of students. Due to variation in the sizes of the classes selected as well as to some districts which sampled additional general education classes, it was determined that applying a weighting during analyses would be important.

The reason for this is that it is important that these results are reflective of the collective youth in public schools in Lucas County. To the extent that one district is more or less represented in that mix reflects the possibility that that the results could be skewed towards the students in that district. For example, let's suppose that one school district had a particularly high level of alcohol use compared to the rest of the districts in Lucas County. If that district had a higher proportion of students in the Lucas County Youth Health Assessment sample compared to their actual proportion in Lucas County, that would result in a higher rate of alcohol use compared to the actual percent among Lucas County public school students as a whole.

For this reason, all analyses were conducted with a weighting applied that adjusted for the representation of the number of students in the sample compared to the actual number in the district (from the Ohio Department of Education's average daily enrollment figures). The table below shows the weightings applied based on the particular district when describing numbers for Lucas County.

For example, if the number of students from a given district represented 5% of the sample but that district represented 10% of actual public students in Lucas County, they would have a weighting applied such that their responses would be weighted by 2.0 (0.10000/0.05000). A different district that represented 10% of the sample but only 5% of the actual public students in Lucas County would have a weighting of 0.5 (0.05000/0.10000). Collectively, the application of these weightings helps to ensure that the results best reflect the youth across all responding districts. The table below depicts the weighting applied to each district.

	2019 Lucas County Youth			**2019 Respondents**			**Weighting**
	#	**%**		**#**	**%**		
District							
Maumee	1,540	5.31915%		107	10.35818%		0.51352
Oregon	2,044	7.05996%		138	13.35915%		0.52847
Ottawa Hills	538	1.85825%		102	9.87415%		0.18819
Springfield	2,162	7.46753%		52	5.03388%		1.48345
Sylvania	4,358	15.05250%		256	24.78219%		0.60739
Toledo Public	14,498	50.07599%		291	28.17038%		1.77761
Washington Local	3,812	13.16662%		87	8.42207%		1.56335
	28,952	100.00000%		1033	100.00000%		

Appendix IV: School Participation

The following schools were randomly chosen and participated in the 2019/2020 Lucas County Health Assessment:

Maumee City
Gateway Middle School
Maumee High School

Oregon City
Fassett Middle School
Clay High School

Ottawa Hills Local
Ottawa Hills Middle School
Ottawa Hills High School

Springfield Local
Springfield Middle School
Springfield High School

Sylvania City
Sylvania Arbor Hills Junior High
Sylvania McCord Junior High
Sylvania Timberstone Junior High
Sylvania Northview High School
Sylvania Southview High School

Toledo Public
Longfellow Elementary
McTigue Elementary
Robinson Elementary
Ottawa River Elementary
Raymer Elementary
Beverly Elementary
Bowsher High School
Rogers High School
Scott High School
Start High School
Wait High School
Woodward High School

Washington Local
Washington Junior High
Jefferson Junior High
Whitmer High School

Appendix V: Lucas County Sample Demographic Profile*

Adult Variable	2020 Adult Survey Sample	2017 Adult Survey Sample	Lucas County Census 2014-2018 (5-year estimate)
Age			
20-29	4.0%	2.0%	14.4%
30-39	8.6%	10.1%	12.2%
40-49	12.8%	15.2%	12.0%
50-59	19.3%	23.8%	13.8%
60 plus	51.3%	48.0%	21.9%
Gender			
Male	48.6%	32.1%	48.5%
Female	49.7%	67.9%	51.5%
Race/Ethnicity			
White	55.0%	50.6%	76.3%
Black or African American	20.9%	24.7%	21.8%
American Indian or Alaskan Native	2.7%	1.7%	1.1%
Asian	0.4%	1.2%	2.4%
Other	12.0%	3.0%	3.3%
Hispanic Origin (may be of any race)	16.3%	16.1%	7.0%
Marital Status†			
Married	46.8%	38.5%	42.2%
Never been married/member of an unmarried couple	21.5%	19.9%	36.1%
Divorced/Separated	18.9%	24.7%	15.3%
Widowed	11.5%	15.5%	6.4%
Education†			
Less than High School Diploma	6.9%	11.1%	10.8%
High School Diploma	25.9%	30.3%	29.7%
Some college/College graduate	65.9%	54.4%	59.5%
Income (Families)			
$14,999 and less	13.2%	20.9%	10.7%
$15,000 to $24,999	12.3%	13.4%	7.6%
$25,000 to $49,999	21.3%	23.6%	22.0%
$50,000 to $74,999	16.0%	14.5%	18.2%
$75,000 or more	26.4%	18.6%	41.5%

**The percents reported are the actual percent within each category who responded to the survey. The data contained within the report however are based on weighted data (weighted by age, race, sex, and income). Percents may not add to 100% due to missing data (non-responses) or multiple responses.*

† The Ohio and Lucas County Census percentages are slightly different than the percent who responded to the survey. Marital status is calculated for those individuals 15 years and older. Education is calculated for those 25 years and older.

Appendix V: Lucas County Youth Sample Demographic Profile*

Youth Variable	2020 Youth Survey Sample
Age	
12 years old or younger	20.9%
13 years old	16.1%
14 years' old	15.2%
15 years' old	14.2%
16 years' old	18.2%
17 years' old	11.5%
18 years old or older	4.0%
Gender	
Male	51.3%
Female	46.8%
Transgender	0.6%
Do not identify as female, male, or transgender	1.4%
Race/Ethnicity	
White	65.3%
American Indian or Alaskan Native	10.7%
Black or African American	33.7%
Hispanic or Latino	16.1%
Asian	4.6%
Native Hawaiian or Other Pacific Islander	1.3%
Other	6.1%
Arab Ancestry/Ethnic Origin	6.7%
Grade Level	
Middle School (6-8)	45.2%
High School (9-12)	54.8%
Individual Grade Level	
6th grade	11.4%
7th grade	15.2%
8th grade	18.6%
9th grade	9.9%
10th grade	19.5%
11th grade	14.6%
12th grade	10.8%

**Percents may not equal 100% due to missing data (non-responses) or multiple response questions.*

Appendix VI: Demographics and Household Information

Lucas County Population by Age Groups and Gender U.S. Census 2010

Age	Total	Males	Females
Lucas County	**37,642**	**18,679**	**18,963**
0-4 years	**29,732**	**15,052**	**14,680**
1-4 years	23,928	12,130	11,798
< 1 year	5,804	2,922	2,882
1-2 years	12,017	6,072	5,853
3-4 years	11,911	6,058	5,853
5-9 years	**28,756**	**14,772**	**13,984**
5-6 years	11,648	6,034	5,614
7-9 years	17,108	8,738	8,370
10-14 years	**28,629**	**14,625**	**14,004**
10-12 years	17,259	8,903	8,356
13-14 years	11,370	5,722	5,648
12-18 years	43,198	22,027	21,171
15-19 years	**33,647**	**17,137**	**16,510**
15-17 years	16,320	9,750	9,270
18-19 years	14,627	7,387	7,240
20-24 years	33,821	16,792	17,029
25-29 years	29,411	14,536	14,875
30-34 years	26,532	13,032	13,500
35-39 years	27,604	13,492	14,112
40-44 years	27,046	13,209	13,837
45-49 years	31,196	15,064	16,132
50-54 years	33,245	16,157	17,088
55-59 years	29,749	14,411	15,338
60-64 years	24,638	11,918	12,720
65-69 years	16,696	7,676	9,020
70-74 years	12,727	5,622	7,105
75-79 years	10,456	4,244	6,212
80-84 years	9,333	3,572	5,761
85-89 years	5,776	1,919	3,857
90-94 years	2,267	632	1,635
95-99 years	494	94	400
100-104 years	56	9	47
105-109 years	2	0	2
110 years & over	2	1	1
Total 85 years and over	**8,597**	**2,655**	**5,942**
Total 65 years and over	**57,809**	**23,769**	**34,040**
Total 19 years and over	**328,715**	**156,239**	**172,476**

LUCAS COUNTY PROFILE

(Source: U.S. Census Bureau, 2019)
2019 ACS 1-year estimates

General Demographic Characteristics

	Number	Percent (%)
Total Population		
2019 Total Population	428,348	100%
Largest City – City of Toledo		
2019 Total Population	272,778	100%
Population by Race/Ethnicity		
Total population	428,348	100%
White	309,082	72.2%
Black or African American	81,931	19.1%
American Indian or Alaskan Native	1,270	0.3%
Native Hawaiian/Other Pacific Islander	630	0.1%
Asian	7,376	1.7%
Other	7,692	1.8%
Two or more races	20,367	4.8%
Hispanic or Latino (of any race)	31,604	7.4%
Population by Age		
Under 5 years	27,099	6.3%
5 to 14 years	54,847	12.8%
15 to 24 years	52,900	12.4%
25 to 44 years	111,497	26.0%
45 to 64 years	110,620	25.8%
65 years and more	71,385	16.7%
Median age (years)	**38.0**	N/A
Household by Type		
Total households	182,105	100%
Households with children <18 years	49,828	27.4%
Married-couple family household	71,079	39.0%
Married-couple family household with children <18 years	23,263	12.8%
Female householder, no husband present	58,875	32.3%
Female householder, no husband present, with children <18 years	14,124	7.8%
Nonfamily household (single person) living alone	30,776	16.9%
Nonfamily household (single person) 65 years and over	14,460	7.9%
Average household size	2.30 people	N/A
Average family size	2.92 people	N/A

General Demographic Characteristics, Continued

Housing Occupancy		
Median value of owner-occupied units	$124,200	N/A
Median housing units with a mortgage	$1,205	N/A
Median housing units without a mortgage	$479	N/A
Median value of occupied units paying rent	$757	N/A
Median rooms per total housing unit	5.9	N/A
Total occupied housing units	182,105	100%
No telephone service available	1,879	1.0%
Lacking complete kitchen facilities	1,739	1.0%
Lacking complete plumbing facilities	676	0.4%
Total household with a computer	166,919	91.7%
Total households with a broadband internet subscription	154,447	84.8%

Selected Social Characteristics

School Enrollment		
Population 3 years and over enrolled in school	101,218	100%
Nursery & preschool	6,210	6.1%
Kindergarten	5,112	5.1%
Elementary School (Grades 1-8)	43,330	42.8%
High School (Grades 9-12)	20,639	20.4%
College or Graduate School	25,927	25.6%
Educational Attainment		
Population 25 years and over	293,502	100%
< 9th grade education	8,351	2.8%
9th to 12th grade, no diploma	23,733	8.1%
High school graduate (includes equivalency)	85,364	29.1%
Some college, no degree	67,125	22.9%
Associate degree	29,911	10.2%
Bachelor's degree	49,217	16.8%
Graduate or professional degree	29,801	10.2%
Percent high school graduate or higher	N/A	89.1%
Percent Bachelor's degree or higher	N/A	26.9%
Marital Status		
Population 15 years and over	346,402	100%
Never married	125,619	36.3%
Now married, excluding separated	148,098	42.7%
Separated	6,424	1.9%
Widowed	22,643	6.5%
Widowed females	17,262	5.0%
Divorced	43,618	12.6%
Divorced females	26,353	7.6%
Veteran Status		
Civilian population 18 years and over	330,079	100%
Veterans 18 years and over	20,033	6.1%

Selected Economic Characteristics

Employment Status		
Population 16 years and over	341,129	100.0%
16 years and over in labor force	213,175	62.5%
16 years and over not in labor force	127,954	37.5%
Females 16 years and over	178,186	--
Females 16 years and over in labor force	103,628	58.2%
Population living with own children <6 years	31,761	--
All parents in family in labor force	21,575	67.9%
Population living with own children 6 to 17 years	59,420	--
All parents in family in labor force	43,830	73.8%
Class of Worker		
Civilian employed population 16 years and over	197,998	100.0%
Private for-profit wage and salary workers	144,358	72.9%
Private not-for-profit wage and salary workers	22,784	11.5%
Local government workers	13,725	6.9%
State government workers	6,030	3.0%
Federal government workers	2,859	1.4%
Self-employed in own not incorporated business workers and unpaid family workers	8,242	4.2%
Occupations		
Civilian employed population 16 years and over	197,998	100%
Management, business, science, and arts occupations	67,774	34.2%
Service occupations	35,600	18.0%
Sales and office occupations	41,838	21.1%
Natural resources, construction, and maintenance occupations	14,583	7.4%
Production, transportation, and material moving occupations	38,203	19.3%
Leading Industries		
Civilian employed population 16 years and over	197,998	100.0%
Agriculture, forestry, fishing and hunting, and mining	786	0.4%
Construction	11,001	5.6%
Manufacturing	34,875	17.6%
Wholesale trade	5,946	3.0%
Retail trade	24,676	12.5%
Transportation and warehousing, and utilities	11,153	5.6%
Information	2,751	1.4%
Finance and insurance, and real estate and rental and leasing	9,183	4.6%
Professional, scientific, and management, and administrative and waste management services	19,334	9.8%
Educational services, and health care and social assistance	46,554	23.5%
Arts, entertainment, and recreation, and accommodation and food services	18,437	9.3%
Other services, except public administration	7,339	3.7%
Public administration	5,963	3.0%

Selected Economic Characteristics, Continued

Income In 2019		
Total households	182,105	100.0%
Less than $10,000	18,939	10.4%
$10,000 to $14,999	8,377	4.6%
$15,000 to $24,999	20,032	11.0%
$25,000 to $34,999	21,124	11.6%
$35,000 to $49,999	23,674	13.0%
$50,000 to $74,999	30,594	16.8%
$75,000 to $99,999	20,396	11.2%
$100,000 to $149,999	22,581	12.4%
$150,000 to $199,999	9,287	5.1%
$200,000 or more	6,920	3.8%
Median household income (dollars)	**$49,448**	N/A
Income in 2019		
Families	107,737	100.0%
Less than $10,000	7,326	6.80%
$10,000 to $14,999	2,478	2.30%
$15,000 to $24,999	10,020	9.30%
$25,000 to $34,999	9,265	8.60%
$35,000 to $49,999	12,390	11.50%
$50,000 to $74,999	18,962	17.60%
$75,000 to $99,999	15,083	14.00%
$100,000 to $149,999	17,992	16.70%
$150,000 to $199,999	7,973	7.40%
$200,000 or more	6,141	5.70%
Median family income (dollars)	**$65,250**	N/A
Per capita income (dollars)	**$29,871**	N/A
Poverty Status in 2019		
People in families	N/A	13.1%
Unrelated individuals 15 years and over	N/A	29.7%

Bureau of Economic Analysis (BEA) Per Capita Personal Income (PCPI) Figures

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2018	$ 46,290	23th of 88 counties
BEA Per Capita Personal Income 2017	$ 44,230	26th of 88 counties
BEA Per Capita Personal Income 2016	$ 43,390	21th of 88 counties
BEA Per Capita Personal Income 2015	$ 42,609	20th of 88 counties
BEA Per Capita Personal Income 2014	$ 40,811	23th of 88 counties

(Source: Bureau of Economic Analysis, https://apps.bea.gov/iTable/index_regional.cfm)
Note: BEA PCPI figures are greater than Census figures for comparable years due to deductions for retirement, Medicaid, Medicare payments, and the value of food stamps, among other things

Poverty Rates, 5-year averages
2013 to 2017

Category	Lucas	Ohio
Population in poverty	19.8%	14.9%
< 125% FPL (%)	24.9%	19.3%
< 150% FPL (%)	29.7%	23.6%
< 200% FPL (%)	39.0%	32.5%
Population in poverty (2002)	12.2%	10.2%

(Source: The Ohio Poverty Report, Ohio Development Services Agency, February 2019, http://www.development.ohio.gov/files/research/P7005.pdf)

Employment Statistics, as of August 2020

Category	Lucas	Ohio
Labor Force	211,500	5,786,900
Employed	189,300	5,276,700
Unemployed	22,200	510,200
Unemployment Rate* in August 2020	10.5	8.8
Unemployment Rate* in July 2020	10.6	9.1
Unemployment Rate* in August 2019	4.7	4.2

**Rate equals unemployment divided by labor force.*
(Source: Ohio Department of Job and Family Services, August 2020, https://ohiolmi.com/Home/RateMapArchive)

Estimated Poverty Status in 2018

Age Groups	Number	90% Lower Confidence Interval	90% Upper Confidence Interval	Percent	90% Lower Confidence Interval	90% Upper Confidence Interval
Lucas County						
All ages in poverty	78,398	72,899	83,897	18.7%	17.4%	20.0%
Ages 0-17 in poverty	24,153	20,819	27,487	25.0%	21.6%	28.4%
Ages 5-17 in families in poverty	16,302	13,694	18,910	23.4%	19.7%	27.1%
Median household income	$47,865	$45,854	$49,876			
Ohio						
All ages in poverty	1,568,586	1,542,309	1,594,863	13.8%	13.6%	14.0%
Ages 0-17 in poverty	489,053	474,343	503,763	19.2%	18.6%	19.8%
Ages 5-17 in families in poverty	329,764	317,103	342,425	17.8%	17.1%	18.5%
Median household income	$56,155	$55,735	$56,575			
United States						
All ages in poverty	41,852,315	41,619,366	42,085,264	13.1%	13.0%	13.2%
Ages 0-17 in poverty	12,997,532	12,873,127	13,121,937	18.0%	17.8%	18.2%
Ages 5-17 in families in poverty	8,930,152	8,834,521	9,025,783	17.0%	16.8%	17.2%
Median household income	$61,937	$61,843	$62,031			

(Source: U.S. Census Bureau, 2018 Poverty and Median Income Estimates, https://www.census.gov/data/datasets/2018/demo/saipe/2018-state-and-county.html)

Federal Poverty Thresholds in 2019 by Size of Family and Number of Related Children Under 18 Years of Age

Size of Family Unit	No Children	One Child	Two Children	Three Children	Four Children	Five Children
1 Person <65 years	$13,300					
1 Person 65 and >	$12,261					
2 people Householder < 65 years	$17,120	$17,622				
2 People Householder 65 and >	$15,453	$17,555				
3 People	$19,998	$20,578	$20,598			
4 People	$26,370	$26,801	$25,926	$26,017		
5 People	$31,800	$32,263	$31,275	$30,510	$30,044	
6 People	$36,576	$36,721	$35,965	$35,239	$34,161	$33,522
7 People	$42,085	$42,348	$41,442	$40,811	$39,635	$38,262
8 People	$47,069	$47,485	$46,630	$45,881	$44,818	$43,470
9 People or >	$56,621	$56,895	$56,139	$55,503	$54,460	$53,025

(Source: U. S. Census Bureau, Poverty Thresholds 2019, https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html)

Appendix VII: County Health Rankings

	Lucas County 2020	Ohio 2020	U.S. 2020
Health Outcomes			
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2065-2018)	9,800	8,600	6,900
Overall heath. Percentage of adults reporting fair or poor health (age-adjusted) (2017)	19%	18%	17%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2017)	4.3	3.9	3.8
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2017)	4.5	4.6	4.0
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2012-2018)	10%	9%	8%
Health Behaviors			
Tobacco. Percentage of adults who are current smokers (2017)	21%	21%	17%
Obesity. Percentage of adults that report a BMI of 30 or more (2015)	35%	32%	29%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2015-2016)	6.7	6.9	7.6
Physical inactivity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2015)	27%	26%	23%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2018)	98%	84%	84%
Excessive drinking. Percentage of adults reporting binge or heavy drinking (2017)	20%	20%	19%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2014-2018)	40%	33%	28%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2017)	766.6	526.6	524.6
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2012-2018)	32	24	23

(Source: 2020 County Health Rankings for Lucas County, Ohio and U.S. data)

	Lucas County 2020	Ohio 2020	U.S. 2020
Clinical Care			
Coverage and affordability. Percentage of population under age 65 without health insurance (2017)	8%	7%	10%
Access to health care/medical care. Ratio of population to primary care physicians (2017)	1,090:1	1,310:1	1,330:1
Access to dental care. Ratio of population to dentists (2017)	1,360:1	1,610:1	1,450:1
Access to behavioral health care. Ratio of population to mental health providers (2018)	340:1	410:1	400:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2019)	6,143	5,168	4,535
Mammography screening. Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2017)	42%	43%	42%
Flu vaccinations. Percentage of Medicare enrollees that had an annual flu vaccination (2017)	50%	49%	46%
Social and Economic Factors			
Education. Percentage of ninth-grade cohort that graduates in four years (2017-2018)	84%	85%	85%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2014-2018)	66%	65%	66%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2018)	5.3%	4.6%	3.9%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2018)	25%	19%	18%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2014-2018)	5.4	4.7	4.9
Family and social support. Percentage of children that live in a household headed by single parent (2014-2018)	48%	36%	33%
Family and social support. Number of membership associations per 10,000 population (2017)	9.9	11.2	9.3
Violence. Number of reported violent crime offenses per 100,000 population (2014 & 2016)	824	293	386
Injury. Number of deaths due to injury per 100,000 population (2014-2018)	91	87	70

(Source: 2020 County Health Rankings for Lucas County, Ohio and U.S. data)

	Lucas County 2020	Ohio 2020	U.S. 2020
Physical Environment			
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2014)	11.9	11.5	8.6
Air, water, and toxic substances. Indicator of the presence of health-related drinking water violations. Yes - indicates the presence of a violation, No - indicates no violation (2018)	Yes	N/A	N/A
Housing. Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2012-2016)	16%	14%	18%
Transportation. Percentage of the workforce that drives alone to work (2014-2018)	84%	83%	76%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2014-2018)	20%	30%	36%

(Source: 2020 County Health Rankings for Lucas County, Ohio and U.S. data)
N/A – Not Available

Appendix VIII: Community Stakeholder Perceptions

2019/2020 Lucas County Community Health Assessment – Virtual Community Event
Tuesday, December 8th, 2020

Based on the data, what are the top issues Lucas County needs to focus on?

- Mental health (3)
- Adverse childhood experiences (ACEs) (2)
- Health disparities (for example, between White and African American populations) (2)
- Obesity (2)
- Resources for children with disabilities
- Safe sleep education and support
- Health equity
- Youth suicide
- Infant mortality
- Providing wellness and other needed clinic services to the community
- Equal access to care
- Social determinants of health (SDOH)
- Health care costs

What surprised you the most?

- The percentages for safe sleep
- The percentage of youth who have attempted suicide
- Lack of medical services
- The rise in mental health issues pre-pandemic
- Disparities - improvements in overall population did not show to have same impact on minority populations
- Higher percentage of adverse childhood experiences among Latino population
- Suicide attempts

What are some of the barriers that clients, patients, neighbors, loved ones or you face regarding the top issues that Lucas County needs to focus on?

- Transportation (2)
- Healthy food access
- How people of color are treated
- Lack of or limited medical services
- Mental health diagnosis and stigma
- Health education
- Access to fresh foods and spaces to exercise in socio-economically disadvantaged neighborhoods
- The where with all for people to navigate current health care settings and receive good care
- Local economy – those in the lowest income bracket experience higher rates of chronic disease, mental health issues, and lack of access to healthy foods
- Lack of access to education
- Good jobs

What will you or your organization do with this data?

- Apply it to our service priorities when considering social determinants of health
- Grant writing and planning
- Incorporate issues that need attention in requests for proposals for services to assist individuals in moving out of poverty
- Collate the findings with our own internal data to determine priorities and drive outreach
- Data influences participation in our programming
- Use it to set priorities and seek funding to address unmet needs

In your opinion, what is the best way to communicate the information from the community health assessment and community health improvement plan to the community?

- Through the agencies that participated in the review
- Postcards mailed out with a website attached
- Social media
- Zoom meetings to implement plans
- Neighborhood sessions that include the residents, non-profit organizations, businesses, libraries, etc. to formulate strategies to address issues within each neighborhood, build community, etc.
- There is no best way to communicate the information. The findings need to be tailored to the audience (English, Spanish versions). Infographics, summaries, models, or using some other figure to relate the concept learned back to the same people you took it from
- Ensure that policymakers understand the information and get information to those agencies who serve the affected populations
- Work to make the data points part of any communication about the topics

Additional feedback:

- Alzheimer's Disease (5%) is the 4th leading cause of death for Lucas County African American females. The report provides no additional information on Alzheimer's Disease on a national level, state level, nor secondary data. If a disease is listed in the top five cause of death, I think it should be addressed in the report as well.